



South Central Ambulance Service



NHS Foundation Trust

Equality Delivery System 2012-2016



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Foreword from Chair and Chief Executive

Introduction

We are personally committed to ensuring that South Central Ambulance Service meets and exceeds its legal duties to promote equality and diversity of opportunity, to promote good relations between the diverse communities we serve and to eradicate discrimination at all levels.

The Trust provides a range of emergency and non-emergency services to the public and the wider NHS within our footprint. Our staffs are often the first point of contact for patients when they suddenly need medical attention and the ambulance service is proud of its care and service it provides. To make sure we care for all our patients and respect their individuality, we will place an emphasis on the training of our staff. This includes awareness of cultural, religious and other needs that are separate from the pure medical or clinical need the individual has. To that end, our patients are seen as whole and complete individuals, whose social and medical needs are interwoven.

The Trust has completed two years of a three years Single Equality Scheme strategy and has now adopted the Equality Delivery System designed by the Equality & Diversity Council to support NHS commissioners and providers to deliver better outcomes for patients and communities and better working environments for staff, which are personal, fair and diverse. The EDS will help SCAS to achieve compliance with the public sector Equality Duty in a way that also helps us deliver on the NHS Outcomes Framework (2010), the NHS Constitution (2010) and the CQC's Essential Standards of Quality and Safety (2010),

Mr Trevor Jones
Chair

Will Hancock
Chief Executive

Executive Summary

The Equality Delivery System outlines to staff and the public how the South Central Ambulance Service NHS Trust intends to demonstrate its commitment to being an organisation that embraces equality and human rights and its stand against discrimination of any kind. The document incorporates the contents and requirements of the Equality Act 2010. This will also embrace actions to eliminate discrimination on the grounds of race, age, religion or belief, sexual orientation, gender reassignment, disability, pregnancy and maternity, marriage and civil partnership and gender.

The Equality Delivery System explains the statutory duties of the Trust under relevant legislation, and incorporates appendices that explain the structure of reporting and monitoring functions of the Trust in relation to equality and diversity and provides details of the local population and workforce, including an action plan /objectives.

Goals of the Equality Delivery System

The system outlines the goals of the Trust. These focus upon:

1. Better Health Outcomes for all
2. Improving patient access and outcome
3. Empowered, engaged and included staff
4. Inclusive leadership at all levels

The key aims of the System are to:

Demonstrate the commitment of the Board to equality and diversity through equity of access to services provided by and commissioned by South Central Ambulance Service. Specifically, our procurement team will work with budget holders during the acquisition of goods and services, to embed equalities and human rights into all stages of procurement. We will also make clear reference to our expectations in relation to equalities and human rights in all our commercial activities.

Demonstrate the commitment of the Board to developing a human rights based approach to its work, ensuring human rights principles and standards are at the heart of Trust policy and service planning.

Demonstrate the commitment of the Board to equality and diversity through equity of access to employment, promotion and training.

Impacts assess each policy, practice and procedure in order to identify any adverse affects upon protected groups within the communities we serve.

How South Central Ambulance Trust will meet its Duties within the Equality Act

The action plan/objectives (Appendix 6) include the specific detail of how SCAS will meet its statutory duty as described in the EDS.

It includes actions, those responsible for achieving the actions, and whether those actions refer to a specific type of diversity, or all elements of diversity and timescales.

The action plan/objectives will be reviewed through the Equality and Diversity Steering Group every two months in order to update and amend it. The outcomes of this regular review are reported to the Board annually, so that they are made aware of successes and areas that need urgent attention.

As new issues come to light through the sub group of the Steering Group and from internal and external sources, actions will be included and amended in the objectives in order to meet our statutory duties.

Each service and policy will be impact assessed to ensure the removal of any adverse effects in our service delivery to protected groups from the communities we serve.

The Trust will respond to all enquiries and comments from members of its local community and its staff with regard to services or policies that do not meet with the general and specific duties, via the Patient and Public involvement process (community) and the Joint Consultative Committee (staff).

The Trust will work collaboratively with a wide range of organisations and partnerships across the four counties we serve. The Equality and Diversity Steering Group will monitor and evaluate the process.

The Trust aims to provide all key information in a range of languages and in alternative communication methods that are appropriate to members of the Health Community at that time. It will make every effort to expand the coverage of languages as it becomes aware of further diversity of cultures and races living and working within the four counties covered by SCAS.

This is in addition to responding to the requirements of members of the public who have a disability and require information in a different format.

The Trust will ensure that all new staff and all line managers have had specific training to assist their understanding of the Equality and Diversity agenda, and that the duties contained within it are communicated to all staff via a variety of means.

The Trust will review the Equality Delivery System on a four-yearly basis.

The Trust will publish an Equality and Diversity Annual Report that will establish its progress in meeting the targets laid down in the action plan/objectives along with demonstrating compliance with its statutory responsibilities.

The Trust invites any comments or complaints regarding the Equality and Diversity Scheme to be addressed to:

Director of HR

South Central Ambulance Service NHS Trust
Northern House
Unit 7 & 8 Talisman Business Centre
Talisman Road
Bicester
Oxfordshire
OX26 6HR
Tel. 01869 365000
Fax. 01869 322814

This executive summary will be made available in alternative formats and Languages on request.

Introduction

Our Shared Vision

Our Vision is Towards Excellence, saving lives and taking healthcare to our patients and our commitment is that we are with you when you need us, providing help and professional mobile healthcare to you and your community. We have developed this vision and commitment to drive the work we do. It is hoped that our vision will resonate with our stakeholders as much as it does with all at South Central Ambulance Service NHS Foundation Trust (SCAS).

There is widespread support for the work we are undertaking to provide a safe, reliable, sustainable and equitable service across the whole of the four counties served by SCAS.

In adopting the Equality Delivery System, the Trust recognises that none of the protected characteristics can be considered in isolation from each other. The EDS gives us an opportunity to address combinations of discrimination and provides us with a broad brush approach to providing solutions.

Many of the systems and processes for the advancement of equality are common to all the strands and combining them also results in savings of time and money (e.g. for consultation, data collection, equality impact assessment).

The formation of the Equality and Human Rights Commission in October 2008 also represents a growing trend towards a more unified approach. According to them, "The Equality and Human Rights Commission exist for one purpose above all:

- To help create a society where our origins do not determine our destiny
- Where the dignity and equal treatment of the individual is unfailing and
- Where the disadvantaged are protected and empowered"

About South Central Ambulance Service NHS Trust

South Central Ambulance Service NHS Foundation Trust (SCAS) was formed on July 1st 2006 following the merger of four ambulance trusts covering the counties of Buckinghamshire, Oxfordshire, Berkshire and Hampshire. The Trust covers a geographical area of circa 3,554 square miles with a resident population of approximately 4 million (see Appendix 1 for details). The Trust employs around 2400 staff.

The Community We Serve

The communities we serve are increasingly diverse and reflect diverse experiences, aspirations and needs. We value this diversity and acknowledge that the experiences of traditionally under-represented groups and target groups are different from the supposed majority. We also recognise that experiences vary between groups, individuals and localities. We know that some groups are at particular, and increased, risk of exclusion and/or discrimination. These groups include (but are not limited to):

- Black and minority ethnic communities
- People with a disability
- Gypsy and Traveller communities
- Lesbian, gay, bisexual transgender (LGB) communities
- Transgender
- Older people
- Young people
- Women
- Carers/dependents
- Religious or faith groups
- People on low income
- Asylum seekers or refugee communities
- Prisoners and ex-offenders.

South Central Ambulance Service NHS Foundation Trust: Main Functions

The Trust's main functions are to provide:

- Accident and emergency call handling service
- Urgent transport call handling service
- Out of hours call handling
- Call handling service for Non-Emergency Ambulance Service
- Accident and emergency response treatment and transportation service to the resident population and visitors
- Urgent response, treatment and transportation service to the resident population and visitors
- Non-emergency ambulance services including voluntary car drivers
- Support to Accident and emergency
- Support to GP Practices
- Support to Police Custody Suite
- Employment

- Support services (e.g. Human Resources, Procurement, Information Communications and Technology, Finance and Audit, Communications services)
 - Education, Training and Development
 - Emergency planning
 - Information and data monitoring
 - Communications/ patient and public involvement
- Also to:
- Ensure partnership working and integrated clinical care pathways
 - Coordinate and facilitate first and community responder schemes.
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South Central Ambulance Service

The South Central Ambulance Service NHS Foundation Trust (SCAS) provides the ambulance service across the south central region of England, excluding the Isle of Wight. The Trust's emergency call centres handle more than 400,000 emergency and urgent calls a year.



EDS Background

The Equality Delivery System (EDS) has been introduced by the Department of Health to assist all staff and NHS organisations understand how equality can drive improvements and strengthen the accountability of services to patients and the public. It is essentially an NHS equality benchmarking tool.

The Equality Delivery System will help ensure that everyone - patients, public and staff - have a voice in how organisations are performing and where they should improve in relation to delivering health care and working lives. It is also a tool-kit for NHS compliance with the Equality Act 2010 and the equality elements of the Care Quality Commission essential standards.

The EDS has been designed to be used by all NHS organisations in England, both providers of services and their commissioners. At the heart of the EDS is a set of 18 equality outcomes grouped into four goals. These outcomes focus on the issues providing most concern to patients, carers, communities, NHS staff and Boards. It is against these outcomes that performance is analysed, graded and action determined.

The four EDS goals are:

1. Better health outcomes for all
2. Improved patient access and experience
3. Empowered, engaged and included staff
4. Inclusive leadership at all levels

The EDS requires NHS organisations to engage with local communities and organisations with an interest in health issues to determine performance through a grading exercise. As part of the EDS process South Central Ambulance Service NHS Foundation Trust is required to identify local stakeholders including patient, staff, communities and partnership groups who will be consulted and engaged to review evidence on the four goals and produce a grading for performance.

EDS Assessments, Grades and Objectives

The grading system has 4 overall goals and 18 outcomes; each outcome provide a criteria against which performance is assessed and graded awarded in 4 levels from -

Under-Developed (**red**)

Developing (**orange**)

Achieving (**green**)

Excelling (**purple**)

These grades provide the opportunity to identify organisational compliance with its equality duties and where necessary highlight objectives/actions for continuous improvement.

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How we assessed and distilled our objectives

SCAS covers four counties with a population of over four million, at the heart of the EDS is the requirement for “meaningful engagement” with stakeholders, in order to achieve this we have established service level agreements with three community voluntary sector organisations, Milton Keynes Equality Council to the north of the patch, Slough Council for Voluntary Services in the centre and Community Action Hampshire to the south. These organisations are contracted to assist SCAS to reach all sections of the communities we serve. For the EDS grading our stakeholders recruited the panel and ensured representation across the protected characteristics.

SCAS opted to hold four separate grading events to provide a wider coverage and ensure a variance of views across the protected groups.

EDS goal 1- “Better health outcomes for all” was hosted by Milton Keynes Equality Council, there were five outcomes with a total of 31 focuses to be considered and graded. Overall the feedback was positive with 68% graded green (achieving); 26% graded purple (excelling) and 6% graded amber (developing). SCAS was considered to have done some excellent work generally. (See MKEC report appendix 2)

EDS goal 2- “Improving patient access and experience” was hosted by Community Action Hampshire, there were four outcomes with 24 focuses to consider. The overall feedback from the group was positive, with 18 greens (achieving) given and 6 ambers (developing). The general agreement was that SCAS are doing some excellent work with Equality and Diversity and diverse communities; however, more could still be done to reach further into communities at a local level to ensure that more groups are directly engaged with and that staff could benefit from receiving more specialists training on working with certain groups, particularly transgender individuals. (See CAH report appendix 3)

EDS goal 3- The South Central Ambulance Service Equality Delivery System grading meeting with a panel of 3 staff side members and 7 members of staff was held on 20 March 2012. This included staff representing a range of protected characteristics, as defined in the Equality Act 2010.

The grading carried out was on the “EDS Objective 3- “Empowered, Engaged and Included Staff”. There were 6 outcomes with a total of 35 focuses to be considered and graded. Overall the feedback was positive with 23 graded green (achieving); 5 graded purple (excelling), 2 graded amber (developing) and 5 graded undeveloped. It was accepted that SCAS has done some excellent work generally, but there was recognition that was considerable work to be done around workforce representation across the protected characteristics at all levels of the organisation. (See SCAS report appendix 4)

EDS goal 4- “Inclusive leadership at all levels” was hosted by Slough Council for Voluntary Services, there were three outcomes with 14 focuses, the overall rating was 9 greens (Achieving) and 5 ambers (Developing) The feedback was positive, with acknowledgement by the panel that there was still a way to go. (See SVC report appendix 5)

The EDS Objectives

The overall ratings awarded by the panels across the four goals are as follows:-

Purple (Excelling)	12.5%
Green (Achieving)	68.2%
Amber (Developing)	14.5%
Red (undeveloped)	4.8%

The awarded grades gives SCAS an overall rating of achieving with a combined excelling and achieving score of 80.7% and a combined developing and undeveloped score 19.3%.

The Equality Delivery System recommends that organisations prioritise by choosing a small number of objectives from the highlighted areas for improvement. SCAS has taken the decision in light of the grades awarded to focus on all of the areas for improvement indicated by our community and staff panels and we have undertaken to report our progress on the objectives directly to our panels as well as the annually published report.

Accordingly, the EDS objectives for SCAS for 2012 -2016 will be all undeveloped and developing focuses as identified by our communities and staff. (See objectives/ action plan appendix 6)

The excelling and achieving ratings can be seen at appendix 7)

Monitoring – all Equality Aspects

Monitoring of the Equality and Diversity agenda will be a priority for the Trust and the objectives/ action plans contained in the EDS will be reviewed on a regular and ongoing basis by the Equality and Diversity Steering Group. The Steering Group will meet 6 times per year and report directly to the Trust Board. The Trust Board will receive quarterly reports. The equality and diversity working group will meet bi-monthly and will report to the E&D steering group.

Decisions on future developments will be supported by the information provided by the Equality and Diversity Steering Group and analysis of this information will be made available within Board minutes. Policy and future developments will be disseminated to the Equality and Diversity Steering Group via the Executive Director for Human Resources and Organisational Development, in conjunction with the Equality and Diversity Manager.

The Legal context for the South Central Ambulance Service Single Equality Scheme

The Equality Delivery System covers the public sector equality duties under the Equality Act 2006. The System has been developed to look at all protected characteristics.

The Duties of the Equality Act 2010

The Act requires the Trust to undertake certain actions within the general and specific duties.

General Duties:

The law says the Trust must have “due regard” to the need to:

- Eliminate discrimination, harassment and victimisation
- Advance equality of opportunity
- Foster good relations.

The elements of the duty are complementary and therefore all three aspects need to be addressed in order to show that the duty is being complied with.

In addition, the Act places **Specific Duties** on South Central Ambulance Service including:

- Publishing information to demonstrate compliance
- Preparing and publishing equality objectives

Conclusion

South Central Ambulance Service NHS Foundation Trust's Equality Delivery System is a living document; it will be regularly revised as new policies are developed by SCAS, and if SCAS takes on new functions. The System will also change as we receive more information from our partners and stakeholders. In particular, it will change as we receive information and comments from our own staff and members of the public. We have outlined key actions in the body of the EDS and more detailed actions in the Objectives.

SCAS is moving forward on equality issues. We recognise that we still have a long way to go. Our aim is to achieve best practice and to develop and implement health policies and programmes that truly match the needs of the different communities we serve.

South Central Ambulance Service: Population Census Data 2001 Appendix1

The following tables are taken from the 2001 Census and are used to provide a context against which information about SCAS staff profile can be compared.

AGE	Thames Valley		Hants	
	Count	%	Count	%
18 to 19	53,278	2.50%	44,908	2.53
20 to 24	136,548	6.40%	112,013	6.3
25 to 29	150,791	7.07%	110,574	6.22
30 to 44	510,902	23.94%	394,500	22.2
45 to 59	408,071	19.12%	344,029	19.36
60 to 64	94,261	4.42%	85,957	4.84
65 to 74	152,618	7.15%	149,640	8.42

GENDER	Thames Valley		Hants	
	Count	%	Count	%
Male	1,056,629	49.51%	872,566	49.10%
Female	1,077,621	50.49%	904,414	50.90%

ETHNICITY	Thames Valley		Hants	
	Count	%	Count	%
Asian or Asian British: Bangladeshi	3,640	0.17	4,812	0.27
Asian or Asian British: Indian	40,603	1.9	11,476	0.65
Asian or Asian British: Other Asian	8,141	0.38	3,011	0.17
Asian or Asian British: Pakistani	42,875	2.01	3,186	0.18
Black or Black British: African	12,007	0.56	3,000	0.17
Black or Black British: Caribbean	17,545	0.82	3,139	0.18
Black or Black British: Other Black	2,565	0.12	629	0.04
Chinese or other ethnic group: Chinese	11,221	0.53	7,195	0.4
Chinese or other ethnic group: Other ethnic group	10,072	0.47	4,523	0.25
Mixed: Other Mixed	7,395	0.35	3,823	0.22
Mixed: White and Asian	9,255	0.43	4,971	0.28
Mixed: White and Black African	2,874	0.13	1,690	0.1
Mixed: White and Black Caribbean	10,318	0.48	4,065	0.23
White: British	1,851,162	86.74	1,676,320	94.34
White: Irish	28,184	1.32	13,071	0.74
White: Other White	76,393	3.58	32,069	1.8

LIMITING LONG TERM CONDITION	Thames Valley		Hants	
	Count	%	Count	%
Households with one or more person with a long term limiting condition*	219,804	26.05	222,131	30.42

* Limiting-long-term illness is a self-assessment of whether or not a person has a limiting long-term illness, health problem or disability which limits their daily activities or the work they can do, including problems that are due to old age.



SOUTH CENTRAL AMBULANCE SERVICE (SCAS) EQUALITY DELIVERY SYSTEM CONSULTATION IN MILTON KEYNES

Feedback Report - 26 March 2012

1. Overview

The South Central Ambulance Service Equality Delivery System grading meeting with a panel of local community stakeholders in Milton Keynes was held on 26 March 2012. This included 18 stakeholders from the protected characteristic groups, as defined in the Equality Act 2010.

The grading carried out was on the “EDS Objective 1- Better health outcomes for all”. There were five outcomes with a total of 31 focuses to be considered and graded. Overall the feedback was positive with 68% graded green (achieving); 26% graded purple (excelling) and 6% graded amber (developing). SCAS was considered to have done some excellent work generally, but it was acknowledged that there may be some issues for some groups where no data has been collected. Despite generally good intentions, SCAS would have difficulties in collecting data for particular groups which would make assessment difficult.

	Developing	Achieving	Excelling	Total
Outcome 1	1	6	0	7
Outcome 2	0	5	1	6
Outcome 3	1	4	1	6
Outcome 4	0	6	0	6
Outcome 5	0	0	6	6
Total	2	21	8	31
%	6	68	26	

2. Feedback on Individual Outcomes and focuses

Outcome 1 Services are commissioned designed and procured to meet the health needs of local communities, promote well-being, and reduce health inequalities

Focus 1: For how many protected groups can the organisation demonstrate that the health needs of patients & carers are being met, and well-being is promoted?

The evidence presented indicated that the health needs of all protected characteristics were being met as no complaints had been received. However, in the absence of monitoring data for all groups the panel felt that a green (achieving) grade should be awarded, leaving opportunities for action as monitoring data is gradually obtained for all groups.

Focus 2: How does the health and well-being of patients & carers from protected groups compare with the health and well-being of all patients & carers?

SCAS responds to all 999 calls irrespective of protected characteristics and is currently setting the standard for all England ambulance services in terms of clinical performance. The panel agreed that a green (achieving) grade should be awarded as there was a concern about data coverage for all groups.

Focus 3: What is the extent of the gap in health inequalities between patients & carers from protected groups and patients & carers as a whole?

Again incomplete data coverage of all groups made it difficult to assess the extent of the gap, if any. The panel agreed that a green (achieving) grade should be awarded

Focus 4: Does the organisation engage with patients, carers & communities (and for foundation trusts, with members and governors) from protected groups on how health needs can be met, well-being promoted, and inequalities reduced?

The panel discussed this at length and concluded that although SCAS had indeed developed working relationships with the relevant stakeholders, but all equalities groups were not actively engaged and there was much more to be done, particularly with the groups that were not “visible”. It was agreed that an amber (developing) grade should be awarded.

Focus 5: Does the organisation take account of key disadvantaged groups in the above processes?

The evidence indicated that much progress had been made in addressing the needs of some disadvantaged groups but SCAS are still developing an appropriate structure for working with some invisible groups e.g. transgender. The panel agreed that a green (achieving) grade should be awarded.

Focus 6: Does the organisation aim to meet health needs & promote well-being of protected groups, and reduce health inequalities, through mainstream processes?

The panel felt it was unclear whether issues relevant to each group were fed through mainstream processes to the entire organisation, and agreed that a green (achieving) grade should be awarded.

Focus 7: Does the organisation have plans in place to progress to the next grade, with milestones?

Milestones were not in place but would be developed based on the EDS grading, the panel agreed that a green (achieving) grade should be awarded.

Outcome 2: Individual patients' health needs are assessed, and resulting services provided, in appropriate and effective ways.

Focus 1: Through the use of best available evidence, for how many protected groups can the organisation demonstrate that patients from protected groups have their health-needs assessments, and resulting services, provided in appropriate and effective ways?

Similar to the issue of incomplete data coverage raised earlier, and the panel agreed that a green (achieving) grade should be awarded.

Focus 2: Through the use of best available evidence, how do the health-needs assessments, and resulting services, for patients from protected groups compare with the health-needs assessment, and resulting services, for patients as a whole?

The panel agreed that despite incomplete data coverage the best available evidence indicated that health needs assessments and resulting services for patients from protected groups were similar to all patients, and a purple (excelling) grade was awarded.

Focus 3: Does the organisation engage with patients (and for foundation trusts, with members and governors) from protected groups about how health-needs assessments, and resulting services, may be provided in more appropriate and effective ways?

The issue of engagement as discussed in 1.4 was again considered and it was agreed that because there was incomplete engagement with patients from all protected groups, it was not possible to consider how assessments and services could be provided more appropriately and effectively. Accordingly, a green (achieving) grade should be awarded.

Focus 4: Does the organisation take account of key disadvantaged groups in the above processes?

The evidence indicated that much progress had been made in addressing the needs of some disadvantaged groups but SCAS are still developing an appropriate structure for working with some invisible groups e.g. transgender. The panel agreed that a green (achieving) grade should be awarded.

Focus 5: Does the organisation aim to improve on patient and carer outcomes for protected groups through mainstream processes?

Again, the panel felt it was unclear whether issues relevant to each group were fed through mainstream processes to the entire organisation, and agreed that a green (achieving) grade should be awarded.

Focus 6: Does the organisation have plans in place to progress to the next grade, with milestones?

Milestones were not in place but would be developed based on the EDS grading, the panel agreed that a green (achieving) grade should be awarded.

Outcome 3: Changes across services for individual patients are discussed with them, and transitions are made smoothly

Focus 1: How do service changes and transitions for patients from protected groups compare with the changes and transitions for patients as a whole?

The panel felt that again due to incomplete data collection, the experiences of patients from each group were not monitored and compared with all service users. It was recommended that this should be addressed and a green (achieving) grade was awarded.

Focus 2: Does the organisation have adequate procedures to prevent breakdown of care pathways for patients from protected groups when transferring across services?

This was considered quite important and the procedures in place to prevent breakdown of care services when transferring across services were clear. SCAS can demonstrate that adequate procedures are in place to prevent breakdown of care services up to the point of handover. Awarded green (Achieving)

Focus 3: Does SCAS engage with patients from protected groups on how service changes are planned and transitions made smooth?

The panel agreed that an amber (developing) grade should be awarded because there was evidence of engagement with most protected groups.

Focus 4: Does SCAS take account of key disadvantaged groups in the above processes?

The evidence indicated that the needs of individual patients were met where feasible and the panel agreed that a purple (excelling) grade should be awarded.

Focus 5: Does SCAS aim to improve on service changes and transitions for protected groups through mainstream processes?

Again, the panel felt it was unclear whether issues relevant to each group were fed through mainstream processes to the entire organisation, and agreed that a green (achieving) grade should be awarded.

Focus 6: Does SCAS have plans in place to progress to the next grade, with milestones?

Milestones were not in place but would be developed based on the EDS grading, the panel agreed that a green (achieving) grade should be awarded.

Outcome 4: The safety of patients is prioritised and assured. In particular, patients are free from abuse, harassment, bullying, violence from other patients and staff, with redress being open and fair to all

Focus 1: Can the organisation demonstrate that patients from protected groups have their safety prioritised and assured?

The panel felt that this could not be demonstrated for all groups and agreed that a green (achieving) grade should be awarded.

Focus 2: How does the safety of patients from protected groups compare with the safety of patients as a whole?

The panel agreed that a green (achieving) grade should be awarded

Focus 3: Does SCAS engage with patients from protected groups on how patient safety procedures can be improved?

The panel agreed that a green (achieving) grade should be awarded

Focus 4: Does SCAS take account of key disadvantaged groups in the above processes?

The evidence indicated that much progress had been made in addressing the needs of some disadvantaged groups but SCAS are still developing an appropriate structure for working with some invisible groups e.g. transgender. The panel agreed that a green (achieving) grade should be awarded.

Focus 5: Does SCAS aim to improve patient safety for protected groups through mainstream processes?

Again, the panel felt it was unclear whether issues relevant to each group were fed through mainstream processes to the entire organisation, and agreed that a green (achieving) grade should be awarded.

Focus 6: Does SCAS have plans in place to progress to the next grade, with milestones?

Milestones were not in place but would be developed based on the EDS grading, the panel agreed that a green (achieving) grade should be awarded.

Outcome 5: Public health, vaccination and screening programmes reach and benefit all local communities and groups

Focus 1: Can the organisation demonstrate that public health, vaccination and screening programmes reach and benefit all protected groups within local communities?

This was outside SCAS' remit as it is not required to provide public health screening. However, the panel agreed that these programmes were a priority and processes were in place to ensure that all communities benefited. It was agreed that a purple (excelling) grade was awarded

Focus 2: Do public health, vaccination and screening programmes benefit protected groups in the same way that they benefit communities as a whole?

This was outside SCAS' remit as it was not required to provide public health screening. However, the panel agreed that these programmes were a priority and processes were in place to ensure that all communities benefited. It was agreed that a purple (excelling) grade was awarded

Focus 3: Does SCAS engage with patients, carers, staff & communities (and for foundation trusts, with members and governors) from protected groups on how public health programmes can be improved and inequalities reduced?

This was outside SCAS' remit as it was not required to provide public health screening. However, the panel agreed that these programmes were a priority and processes were in place to ensure that all communities benefited. It was agreed that a purple (excelling) grade was awarded

Focus 4: Does SCAS take account of key disadvantaged groups in the above processes?

This was outside SCAS' remit as it was not required to provide public health screening. However, the panel agreed that these programmes were a priority and processes were in place to ensure that all communities benefited. It was agreed that a purple (excelling) grade was awarded

Focus 5: Does SCAS aim to improve the efficiency of public health programmes for protected groups through mainstream processes?

This was outside SCAS' remit as it was not required to provide public health screening. However, the panel agreed that these programmes were a priority and processes were in place to ensure that all communities benefited. It was agreed that a purple (excelling) grade was awarded.

Focus 6: Does SCAS have plans in place to progress to the next grade, with milestones?

This was outside SCAS' remit as it was not required to provide public health screening. However, the panel agreed that these programmes were a priority and processes were in place to ensure that all communities benefited. It was agreed that a purple (excelling) grade was awarded.

3. Conclusion

The panel of local community stakeholders in Milton Keynes felt that the evidence presented and discussions indicated that SCAS had made significant progress in the achievement of its Equality Delivery System (EDS) objectives. However, there were some key areas for action namely:

- Data collection for all protected groups. SCAS collects quantitative data for some groups but needs to recognise that it may not be possible to achieve this for all groups and qualitative data will need to be collected for some groups. This could be done through the establishment of feedback panels or focus group discussions.
- It is unclear how equality and diversity evidence feeds through and is considered throughout the organisation. This process needs to be more transparent.

Milton Keynes Equality Council
Acorn House, 377 Midsummer Boulevard,
Central Milton Keynes. MK9 3HP – www.mkequalitycouncil.org.uk
Director/CEO - Navritaa@mkequalitycouncil.org.uk
Vice Chair - Christine.demyers-Robinson@googlemail.com



April 2012

**SCAS Equality Delivery System Meeting
- Feedback Report -
23 March 2012**

Appendix 3

Overview

The South Central Ambulance Equality Delivery System Grading meeting with local interest groups in Hampshire was held on 23 March 2012. Attendees included representatives from the protected characteristic groups, as defined in the Equality Act 2010, including gypsies and travellers and the Nepalese community.

The grading carried out was on “Improved Patient Access and Experience” and there were 24 factors to consider. The overall feedback from the group was positive, with 18 greens (achieving) given and 6 ambers (developing). The general agreement was that SCAS are doing some excellent work with Equality and Diversity and diverse communities; however, more could still be done to reach further into communities at a local level to ensure that more groups are directly engaged with and that staff could benefit from receiving more specialists training on working with certain groups, particularly transgender individuals.

Objectives and Outcomes - feedback

Can SCAS demonstrate that patients, carers & communities from protected groups can readily access services, and are not denied access on unreasonable grounds?

As all patients are responded to and taken to hospital if necessary, without fail, the panel awarded a green (achieving) mark. They noted that generally, the response and service to all protected groups is excellent, but a few issues around disabled access (calling via telephone is not always possible for some people) and transgender patients were flagged up.

How does the access of patients, carers & communities from protected groups compare with the access of patients, carers & communities as a whole?

This question was similar in evidence to the previous question; therefore the panel awarded a green (achieving) mark.

Does the organisation engage with patients, carers & communities (and for foundation trusts, with members and governors) from protected groups about access to its services, and how to make progress?

The panel noted that not all equalities groups are actively engaged with and some are overlooked. The feedback offered was that the information needs to be cascaded to community groups. Also, issues such as transgender awareness need to be passed on to front line staff. The panel therefore awarded an amber (developing) mark.

Does the organisation take account of key disadvantaged groups in the above processes?

This question had been evidenced by the above questions so the panel agreed on a green (achieving) mark.

Does the organisation aim to improve access for protected groups through mainstream processes?

The panel feedback stated that they need to evidence that the equality and diversity mainstreamed processes are fed through the entire organisation more clearly. However, the general consensus was positive and the grade awarded was green (achieving).

Does the organisation have plans in place to progress to the next grade, with milestones?

The panel awarded a green (achieving) mark as the meeting itself was proof of a plan to progress things. SCAS also stated that they plan to further the feedback and requests raised at the meeting.

Can SCAS demonstrate that patients from protected groups are informed and supported to be involved in decisions about their care, and to exercise choice about treatments and place of treatment?

The panel stated that the evidence is not totally clear but the number of compliments against complaints is a good indication, as are the audit outcomes. The panel agreed that 'staff training on communication skills' should be added to their evidence in future. The panel awarded a green (achieving) mark.

How does the information & support needed by patients from protected groups to help them to be involved in decisions about their care, and to exercise choice about treatments and place of treatment, compare with the information & support provided to patients as a whole?

This question had been evidenced in previous questions. The panel agreed on awarding a green (achieving) mark.

Does SCAS engage with patients (and for foundation trusts, with members and governors) from protected groups about how they are informed and

supported to be involved in decisions about their care and make choices about treatments and place of treatment, and how to make progress?

This question was evidenced in the same way as previous questions and was awarded a green (achieving) mark.

Does SCAS take account of key disadvantaged groups in the above processes?

The panel quickly agreed that the whole process had evidenced this question and offered a green (achieving) mark.

Does SCAS aim to improve information & support on diagnoses and treatments for protected groups through mainstream processes?

This question had been previously evidenced. The panel awarded a green (achieving) mark. SCAS also mentioned that there were plans for continuous improvement.

Does SCAS have plans in place to progress to the next grade, with milestones?

Panel awarded green (achieving) mark as this was evidenced throughout the process.

Can SCAS demonstrate that patients & carers report and enjoy positive experiences of the organisation, including being listened to and respected, and having their dignity and privacy prioritised?

The number of complaints made against SCAS, were a considerable amount less than the compliments. The panel suggested that the already existing questionnaire should have a larger sample and the information needs to be cascaded further. It was awarded a green (achieving) mark.

How does the experience of patients & carers from protected groups compare with the experience of patients & carers as a whole?

The panel feedback was that not enough is done to monitor the experience that those from protected groups may have compared to other service users. Questionnaires need to include more specific equalities monitoring. The panel awarded an amber (developing) mark.

Does SCAS engage with patients & carers from protected groups about their experiences of the organisation, and how to make progress?

The panel noted a requirement to cascade information to community groups and they therefore awarded an amber (developing) mark.

Does the organisation take account of key disadvantaged groups in the above processes?

The evidence showed that SCAS are still developing the structure of working with minority groups e.g. transgender. The panel suggested further cascading of information and offered an amber (developing) mark.

Does SCAS aim to improve on patient & carer experience for protected groups through mainstream processes?

The evidence, such as information about SVIL group and other reviews led the panel to award a green (achieving) mark.

Does SCAS have plans in place to progress to the next grade, with milestones?

This was proven with earlier evidence and the panel awarded green (achieving) mark.

How does the handling of complaints by and subsequent redress for, patients & carers from protected groups compare with the handling of complaints and subsequent redress for patients & carers as a whole?

SCAS informed the panel that there is a patient experience review group and a complaints manager. General consensus was that more needs to be done to gain a breakdown of feedback from each protected group, but the panel awarded a green (achieving) mark.

Does SCAS engage with patients & carers from protected groups about how their complaints, and subsequent redress, are handled, and how to make progress?

This question was evidenced in the same way as the previous question so the mark reflects that. The panel offered a green (achieving) mark.

Does SCAS take account of key disadvantaged groups in the above processes?

The panel agreed that more cascading of information is required and that monitoring the feedback of protected groups needs to be improved. Therefore the panel awarded an amber (developing) mark.

Does SCAS aim to improve how complaints are handled for protected groups through mainstream processes?

The panel agreed that the questionnaires need to be developed in order to include feedback for specific protected groups. Therefore, they awarded an amber (developing) mark.

Does SCAS have plans in place to progress to the next grade, with milestones?

Previous questions evidenced this and SCAS informed us that they do plan to enhance their resources. The panel awarded a green (achieving) mark.



Appendix 4

SOUTH CENTRAL AMBULANCE SERVICE (SCAS) EQUALITY DELIVERY SYSTEM CONSULTATION at Bicester HQ Feedback Report - 20 March 2012

4. Overview

The South Central Ambulance Service Equality Delivery System grading meeting with a panel of 3 staff side members and 7 members of staff was held on 20 March 2012. This included staff representing a range of protected characteristics, as defined in the Equality Act 2010.

The grading carried out was on the “EDS Objective 3- “Empowered, Engaged and Included Staff”. There were 6 outcomes with a total of 35 focuses to be considered and graded. Overall the feedback was positive with 23 graded green (achieving); 5 graded purple (excelling), 2 graded amber (developing) and 5 graded undeveloped. It was accepted that SCAS has done some excellent work generally, but there was recognition that was considerable to be done around workforce representation across the protected characteristics at all levels of the organisation.

Individual Outcomes and focuses

Outcome 1: Recruitment and selection processes are fair, inclusive and transparent so that the workforce becomes as diverse as it can be within all occupations and grades.

Focus1: Can SCAS demonstrate that staff from protected groups experience inclusive and equitable recruitment and selection processes within all occupations and grades?

The evidence presented indicated that the recruitment and selection process addresses the needs of all protected characteristics. The panel awarded green (Achieving)

Focus 2: Can SCAS demonstrate that staffs from protected groups are represented on the Board, in senior management teams and in clinical leadership roles, to the same extent that they are reflected in the total workforce of the organisation and the population being served?

The panel felt there was substantial under representation across all the protected characteristics at Board level, Executive and senior management levels and some representation in clinical leadership role. The rating awarded is amber (Undeveloped)

Focus 3: Does SCAS engage with staff-side organisations and staff about ensuring that recruitment and selection processes are fair, inclusive and transparent for staff from protected groups, and how to make progress?

On the evidence present presented the panel felt that whilst SCAS did engage with the staff side (JCC) the engagement did not focus on all protected characteristics, therefore an amber was awarded (Developing)

Focus 4: Does SCAS take account of key disadvantaged groups in the above processes?

There was evidence to support the organisations efforts to account of key disadvantaged groups EG disability and sexual orientation. The panel rated the Trust green (Achieving)

Focus 5: Does SCAS deal with instances of possible unfairness & discrimination in recruitment and selection processes for protected groups, and quality assure practice and outcome, through mainstream processes?

Evidence provided indicates the Trust has robust processes in place to ensure fairness in its selection of staff with systems in place to challenge selection decisions for internal and external applicants. The panel awarded green (Achieving)

Focus 6: Does SCAS have plans in place to progress to the next level, with milestones?

The Equality Delivery System and current Single Equality Scheme has in place plans to progress to the next level. The panel awarded green (Achieving)

Outcome 2: Levels of pay and related terms and conditions are fairly determined for all posts, with staff doing equal work and work rated as of equal value being entitled to equal pay.

Focus 1: Can SCAS demonstrate that staffs from protected groups enjoy levels of pay and related terms & conditions no different to the pay and related terms & conditions for staff as a whole doing equal work or work rated as of equal value?

SCAS complies fully with the principles of Agenda for Change and has a robust job evaluation system and appeal mechanism. The panel awarded purple (Excelling)

Focus 2: Does SCAS engage with staff-side organisations and staff about ensuring pay and related terms & conditions for staff from protected groups are fairly determined for all posts, and how to make progress?

The panel felt that the previous question addressed this and acknowledged engagement via the Staff side, it awarded green (Achieving)

Focus 3: Does SCAS take account of key disadvantaged groups in the above processes?

The panel felt the above process did not exclude any of the protected characteristics and awarded green (Achieving)

Focus 4: Does SCAS deal with instances of possible unfairness and discrimination with regard to pay and related terms & conditions for protected groups and quality assure practice and outcomes, through mainstream processes?

The evidence produced indicated that SCAS has robust processes in place to address and grievances or discrimination. The panel awarded purple (Excelling)

Focus 5: Does SCAS have plans in place to progress to the next level, with milestones?

The Equality Delivery System and current Single Equality Scheme has in place plans to progress to the next level. The panel awarded green (Achieving)

Outcome 3: Through support, training, personal development and performance appraisal, staff are confident and competent to do their work, so that services are commissioned or provided appropriately

Focus 1: Can SCAS demonstrate that staff from protected groups receives both personal development and performance appraisals no different to that received by staff as a whole?

The panel on the evidence presented felt there was no difference between staff from protected groups compared with staff as a whole. A rating of green (Achieving)

Focus 2: Can the organisation demonstrate that all staff are supported, trained and developed to be competent and confident to plan, procure or deliver services that are personal, fair or diverse to meet the needs of all communities?

On the evidence the panel took the view that the Workforce Development Board was aimed at operational staff only and therefore by definition would not meet the needs on protected characteristic groups who are non operational. Accordingly, a rating of red (Undeveloped)

Focus 3: Does SCAS engage with staff-side organisations and staff around the provision and uptake of personal development opportunities & performance appraisals for protected groups, and how to make progress?

In view of the previous question and rating the panel rated the Trust red (Undeveloped)

Focus 4: Does SCAS take account of key disadvantaged groups in the above processes?

In light of the previous two questions the panel awarded a red (Undeveloped)

Focus 5: Does SCAS deal with instances of possible unfairness in the provision and uptake of personal development opportunities & performance appraisals for protected groups and quality assure practice and outcomes, through mainstream processes?

The panel felt that although the organisation was not meeting the needs of protected groups in the above process they acknowledged that there was processes in place to address possible unfairness in personal development issues. The panel awarded amber (Developing)

Focus 6: Does SCAS have plans in place to progress to the next level, with milestones?

The Equality Delivery System and current Single Equality Scheme has in place plans to progress to the next level. The panel awarded green (Achieving)

Outcome 4: Staff are free from abuse, harassment, bullying, violence from both patients and their relatives and colleagues, with redress being open and fair to all.

Focus 1: Can SCAS demonstrate that staff from protected groups are free from abuse, harassment, bullying and violence from patients, their relatives and colleagues?

The panel that the Trust can demonstrate that all staff are protected from bullying, harassment and abuse from patients and relatives and awarded a green (Achieving)

Focus 2: How does the level of abuse, harassment, bullying and violence experienced by staff from protected groups compare with the level of abuse etc experienced by staff as a whole?

The panel observed that there was anecdotal evidence of bullying and harassment and questioned the willingness of staff to report incidents. A rating of red, Undeveloped was awarded.

Focus 3: Does SCAS engage with staff-side organisations and staff about abuse, harassment, bullying, violence experienced by protected groups, and how to make progress?

The panel awarded green (achieving) acknowledging that there was engagement by the Trust with staff side.

Focus 4: Does SCAS take account of key disadvantaged groups in the above processes?

There was acceptance that the Trust has a robust dignity at work policy that address key disadvantaged groups. It awarded a green (Achieving)

Focus 5: Does SCAS deal with instances of possible abuse etc against staff from protected groups, and quality assure practice and outcomes, through mainstream processes?

The panel acknowledged there are processes in place to address the above issues and that the Trust has a “Zero Tolerance) approach to bullying etc, awarded purple (Excelling)

Focus 6: Does SCAS have plans in place to progress to the next level, with milestones?

The Equality Delivery System and current Single Equality Scheme has in place plans to progress to the next level. The panel awarded green (Achieving)

Outcome 5: Flexible working options are made available to all staff, consistent with the needs of the service, and the way people lead their lives

Focus 1: Can the organisation demonstrate that staff from protected groups have access to a full range of flexible working options?

The panel observed that the Trust provides flexible working to support all staff irrespective of protected characteristics; it therefore awarded a rating of purple. (Excelling)

Focus 2: How does the range and extent of flexible working options made available to staff from protected groups compare with the range and extent of flexible working options made available to staff as whole?

The panel noted that flexible working policies apply to all SCAS staff irrespective of protected characteristics; and that when required reasonable adjustments are available for disabled staff in addition to the above policies. The pane awarded purple. (Excelling)

Focus 3: Does SCAS engage with staff-side organisations and staff about developing and improving flexible working options for all protected groups, and how to make progress?

There was acknowledgement that the Trust did engage with staff side on the implementation of workforce policies. Awarded green. (Achieving)

Focus 4: Does SCAS take account of key disadvantaged groups in the above processes?

The panel agreed that the above processes are applied to all staff and where necessary adjustments are made to accommodate key disadvantaged groups. E.G disability (Reasonable adjustments) Awarded green. (Achieving)

Focus 5: Does SCAS deal with instances of unfairness and discrimination with regard to the availability of flexible working options for protected groups, and quality assure practice and outcomes, through mainstream processes?

The panel agreed that there were mainstream processes in place to deal with incidents of unfairness or discrimination. The panel awarded green. (Achieving)

Focus 6: Does SCAS have plans in place to progress to the next level, with milestones?

The Equality Delivery System and current Single Equality Scheme has in place plans to progress to the next level. The panel awarded green (Achieving)

Outcome 6: The workforce is supported to remain healthy, with a focus on addressing major health and lifestyle issues that affect individual staff and the wider population

Focus: 1 Can SCAS demonstrate that staffs from protected groups are supported to remain healthy and have access to initiatives that promote healthy lifestyles?

The panel acknowledged that the Trust provided a range of policies aimed at supporting staff to remain healthy and that these policies apply to all staff irrespective of protected characteristics. The panel awarded green. (Achieving)

Focus 2: How does support to remain healthy and access to initiatives to promote healthy lifestyles for staff from protected groups compare with such support for staff as a whole?

There was acknowledgement by the panel that because the policies applied to all staff irrespective of protected characteristics, there would be no difference between staff.

Focus 3: Does SCAS engage with staff-side organisations and staff about healthy lifestyle initiatives for staff from protected groups, and how to make progress?

The panel agreed that the Trust engaged with staff and staff side around healthy lifestyle initiatives. The panel awarded green. (Achieving)

Focus 4: Does SCAS take account of key disadvantaged groups in the above processes?

The panel agreed that the above processes are applied to all staff and where necessary adjustments are made to accommodate key disadvantaged groups. E.G disability (Reasonable adjustments) Awarded green. (Achieving)

Focus 6: Does SCAS aim to improve the health and lifestyles of staff from protected groups, and quality assure practice and outcomes, through mainstream processes?

The Trust's Equality and Diversity Steering Group is chaired by the Trust's Chief Executive Officer. The group has a wide ranging membership from within the Trust and representatives from the voluntary sector.

SCAS also has a working group chaired by the Equality & Diversity Manager, this group is tasked with implementing tasks set by the steering group, it reports to the CEO who reports to the Board. The panel awarded green. (Achieving)

Conclusion

The panel of staff and staff side members concluded that the evidence presented and discussions indicated that SCAS had made significant progress in the achievement of its Equality Delivery System (EDS) objectives. However, there was acknowledgement that was some key areas to be addressed.

NHS South Central Ambulance Trust (SCAS) Grading Panel

An event for voluntary and community organisations and service users to grade South Central Ambulance on their Equality Delivery System (EDS) for the NHS.

**FRIDAY 30TH MARCH 2012 10.00 A.M. – 2.00 P.M.
SPORTS ABLE, BRAYWICK SPORTS GROUND, BRAYWICK ROAD,
MAIDENHEAD.**

Report produced by Jesal Dhokia, Statagic Partnerships Manager, Slough Council
for Voluntary Service, April 2012

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Facilitated by: South Central Ambulance Service with assistance in preparation from Slough Council for Voluntary Service

Attended by: Please see Appendix 1 for the 7 people who signed in.

Summary of the session

Background

The panel members were invited to grade the South Central Ambulance Service on their Equality Delivery System (EDS) for the NHS. The four EDS objectives are:

1. Better health outcomes for all
2. Improved patient access and experience
3. Empowered, engaged and included staff
4. Inclusive leadership at all levels

The EDS Manager gave an overview of SCAS followed by an EDS grading outline. The EDS will support NHS commissioners and providers to deliver better outcomes for patients and communities and better working environments for staff, which are personal, fair and diverse. If used effectively, it will help organisations achieve compliance.

Grading Manual

The day began with an introduction and presentation by **Ludlow Johnson, Equality & Human Rights Manager** from the South Central Ambulance Service.



Ludlow Johnson

Ludlow presented a very interesting and well received presentation on the background, purpose and scope of the Equality Delivery System for the NHS. He explained the design of the rating grade, the process, the evidence and the nine protected characteristics, as well as how these fitted in with the Annual Plans and the local objectives and priorities.

The panel were asked to grade on objective 4. **Inclusive leadership at all levels.**

It was noted that the panel covered all aspects of the 7 characteristics – disability, sexuality orientation, religion and belief, race, gender and age.

A Question Session after each outcome allowed Ludlow to cover any queries. It was noted that the panel were knowledgeable in many areas and were able to scrutinise at each outcome, taking over 1 hour and 15 minutes for outcome 1 alone.

Questions before the grading

1. Who provides the evidence?

We provide the evidence, we are monitored by the Care Quality Commission and the Strategic Health Authority.

2. Who funds you?

We are currently commissioned by the Primary Care Trust.

3. Can the monitoring authorities not grade you?

We will send them the results of these grading panels.

Comment from panel member – There was no loop system for the hard of hearing panel member, hard of hearing members of the community are always overlooked. GP's do not recognise this at all. There is a concern whether they will recognise this within the GP Commissioning.

There are huge problems with access to services.

Response -The new Equality Act will change the way they work and deliver services.

**Outcome 1:
Board and senior leaders conduct and plan their business
so that equality is advanced, and good relations fostered,
within their organisations and beyond.**

Focus 1: How well is the local NHS doing on Equality?

1. Boards and Senior leaders conduct and plan their business so that equality is advanced and good relations fostered, within their organisations and beyond.

- Several questions were raised by the panel members around the issue of training. They felt that ‘accessing training does not necessarily mean they understand it.’ The panel asked if there was a verification process.

There are patient surveys carried out and the whistleblowing policy would also pick this up too.

- Is there a complaints procedure?

There is a PALS Service. Clinicians take the decision as to where patients are referred. No complaints as such around the protected characteristics have been recorded by PALS. The surveys are carried out immediately and there was a 40% response.

It was noted that the system was not designed in a way for the panel to sit down and review the documents themselves.

However, there are Service Level Agreements in place in each of the areas to ensure SCAS engage with the wider community, they have also produced a booklet in different languages in order to use different methods of engagement. SCAS do try and raise their own profile and they have found that they get very little applications in for employment from BME communities. SCAS are keen to raise their profile as widely as possible.

- What does ‘always’ in the grading mean? The question has been phrased in such a way that it makes it difficult for people to grade immediately.
- The system around the whole grading is at fault
- As amateurs we particularly don’t know what questions to ask.

The panel were aware that HealthWatch will not be up and running by January and maybe not until towards the end of 2012. Bearing this in mind people wanted to know how the Equality Delivery System be monitored and who will report back to the NHS on its effectiveness? The reply was that there would be an Overview Scrutiny Committee.

Evidence of the Board's structure, annual reports, externally audited accounts and training was provided as evidence. The panel felt that the question should be changed to the 'Trust.' They rated this question on that basis.

The panel rated this at '**achieving**' at a 5 to 2 average.

Focus 2: Do Board members and senior leaders actively take steps to create high performing diverse teams and develop diverse talent in the organisation?

It was decided that the Black Minority and Ethnic operations are so low that the panel decided to rate this at an overall consensus at '**developing**.'

Focus 3: Do Board members and senior leaders include advancing equality of opportunity and fostering good relations in their personal objectives and ask the same of their staff?

Board members do not do their own appraisals – Board members are not appointed by Governors. The panel decided to rate this at an overall consensus at '**developing**.'

Focus 4: Do Board members and senior leaders demonstrate the importance of engaging with patients and communities, across the protected groups, in their decision making and service review, and require the same of all parts of the organisation?

The panel questioned whether the board members and senior leaders go out to individual faith groups? The reply was that they do not target specific groups but the wider community.

Do you actively recruit in the minority communities? - we have a local events team that go out to the community and we do realise that there is a lot of work that needs to be done in this area. We recognise the importance of it and we involved all staff at all levels, for example, we attended the Reading Festival to raise awareness.

The panel felt that they would rate this at '**achieving.**'

Recomendation - that SCAS target specific groups at a wider level.

Focus 5: Do Board members and senior leaders demonstrate the importance of engaging with staff side and staff, across the protected groups, in their decision-making and service review, and require the same of all parts of the organisation?

There was sufficient evidence presented including evidence of a policy review group that meet once a month. There are also union representatives who also get their messages to the staff and the Board. Senior leaders also support the union supporting the staff.

The panel felt they would rate that at '**achieving.**'

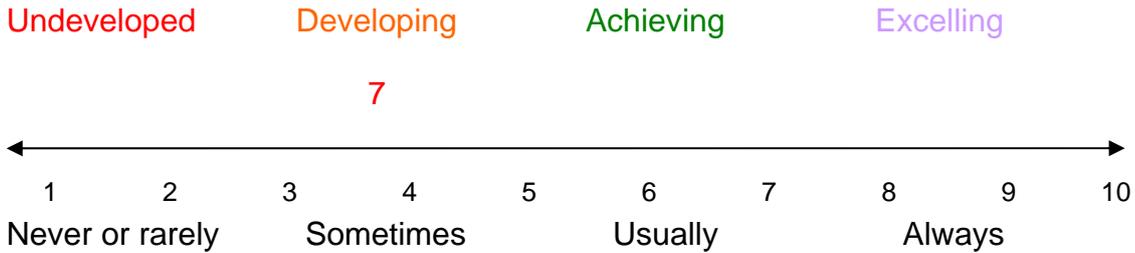
Focus 6: Do Board members and senior leaders demonstrate the importance of using robust evidence, across the protected groups, in its decision-making and service review and require the same of all parts of the organisation?

The panel wanted to know what was the representation from the community.

SCAS use a conduit such as Slough CVS to ensure the message is fed back to various communities. We recognise the importance of the message getting out to a wide range of community members as possible. We are currently looking for a new partner to carry this out for us.

The panel rated this as '**developing.**'

Focus 3: Do Board members and senior leaders include advancing equality of opportunity and fostering good relations in their personal objectives and ask the same of their staff?



Focus 4: Do Board members and senior leaders demonstrate the importance of engaging with patients and communities, across the protected groups, in their decision making and service review, and require the same of all parts of the organisation?



Focus 5 -

Focus 5: Do Board members and senior leaders demonstrate the importance of engaging with staff side and staff, across the protected groups, in their decision-making and service review, and require the same of all parts of the organisation?



Never or rarely Sometimes Usually Always

Focus 6: Do Board members and senior leaders demonstrate the importance of using robust evidence, across the protected groups, in its decision-making and service review and require the same of all parts of the organisation?

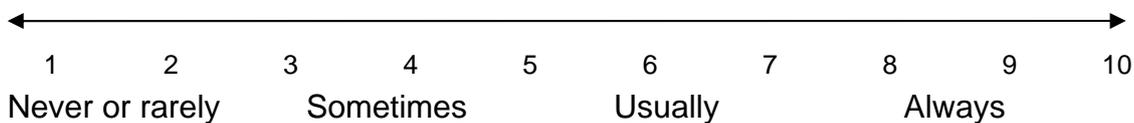
Undeveloped

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Focus 7: Do Board members and senior leaders deal with issues of personalisation, fairness and diversity, across the protected groups, as part of the mainstream business and internal assurance processes?

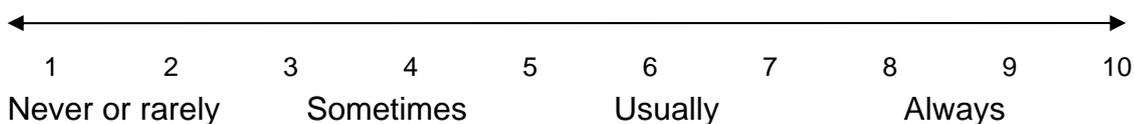
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Outcome 2:

Middle managers and other line managers support and motivate their staff to work in culturally competent ways within a work environment free from discrimination.

Focus 1: Do middle and line managers actively take steps to create high-performing diverse teams and develop diverse talent in the organisation?

The panel scrutinised the diversity in earlier questions, where it was discussed that there needs to be further representation and better representation, for this reason they rated this as **'developing.'**

Focus 2: Do middle and line managers include advancing equality of opportunity and fostering good relation in their personal objectives and ask the same of their staff?

How many middle managers do you have and how many fall in these categories? We have around 250 middle managers and we have 40/50 ratio split within the gender characteristic. We are low on ethnicity and we recognise that more needs to be done.

The panel rated this as **'developing.'**

Recommendation – to proactively target diverse communities when the next recruitment campaign starts.

Focus 3: Do middle and line managers motivate and support their staff in understanding and responding to the different needs of patients, carers, communities and colleagues from protected groups?

There was sufficient evidence presented for the panel to rate, although it was noted that SCAS themselves feel it is difficult when they do not have any knowledge of any complaints made by these protected characteristics. We carry out a 360 appraisal and any issues are raised within staff appraisals.

The panel rated this at **'achieving.'**

Focus 4: Do middle and line managers use a range of evidence to gauge the extent to which they and their staff

are working in culturally competent ways and that the work environment is free from discrimination?

A delegate made a comment that 'culturally' is mentioned which could take the view that all other characteristics are excluded.

However, it was explained that the question takes all characteristics into consideration. Staff surveys are carried out and SCAS have been rated overall 30% above the national average and has been rated the highest across the Country for delivering Equality and Diversity training across the workforce.

- Is the organisation free from discrimination?

We recognise that sometimes discrimination is hidden. Managers do have a whole day on the equality training.

The panel felt they would rate this at '**achieving.**'

Focus 5: Do middle and line managers engage with staff from protected groups to identify and plan responses to meet the needs of diverse patients, carers, communities and colleagues from the protected groups?

The panel without any discussion felt evidence for this has been presented and this should be awarded '**achieving**'

Focus 6: Do middle and line managers actively take steps to capture and disseminate examples of good practice demonstrating how to work in culturally competent ways across the protected groups?

There was enough evidence presented to the panel for them to rate this. It was noted that in the Year Ending March 2011, 121 complaints were received however none of them were around Equality and Diversity. SCAS monitor all feedback and the feedback is given to staff members as well as compliments, of which 660 were received the same year.

A comment by the panel was noted towards the attitudes of A&E staff which is very different to the ambulance staff. A&E staff are very negative towards patients.

- Have you found a decline in the Walk-in centres?

If we can't deal with it ourselves we do take them down to the Walk-in Centres and especially if we can't take them to A&E.

-Are targets fed back to staff too?

Yes we are the leading ambulance trust in the Country.

The panel rated this at 'achieving.'

The Rating Exercise

Focus 1: Do middle and line managers actively take steps to create high-performing diverse teams and develop diverse talent in the organisation?



Focus 2: Do middle and line managers include advancing equality of opportunity and fostering good relation in their personal objectives and ask the same of their staff?



Focus 3: Do middle and line managers motivate and support their staff in understanding and responding to the different needs of patients, carers, communities and colleagues from protected groups?

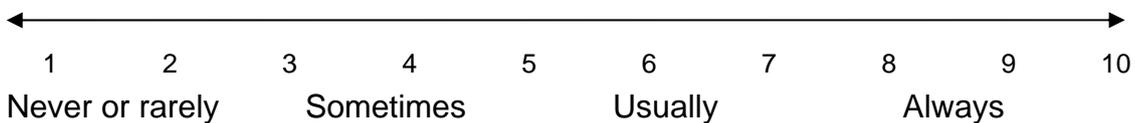


Never or rarely Sometimes Usually Always

Focus 4: Do middle and line managers use a range of evidence to gauge the extent to which they and their staff are working in culturally competent ways and that the work environment is free from discrimination

Undeveloped Developing Achieving Excelling

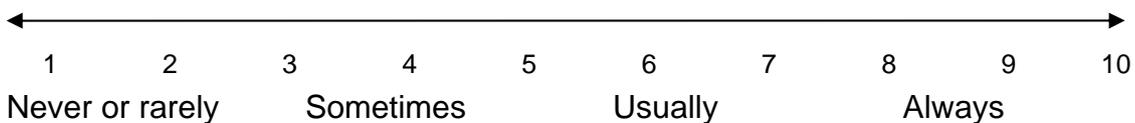
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Focus 5: Do middle and line managers engage with staff from protected groups to identify and plan responses to meet the needs of diverse patients, carers, communities and colleagues from the protected groups?

Undeveloped Developing Achieving Excelling

7



Focus 6: Do middle and line managers actively take steps to capture and disseminate examples of good practice demonstrating how to work in culturally competent ways across the protected groups?

Undeveloped Developing Achieving Excelling

7



Never or rarely

Sometimes

Usually

Always

Outcome 3:

The organisation uses a Competency Framework for Equality and Diversity Leadership to recruit, develop and support strategic leaders to advance equality outcomes.

Focus 1: Does the organisation use the Competency Framework for Equality and Diversity Leadership?

Training for competency for equality and diversity has been undertaken, to be delivered to all managers and staff. All managers and supervisors have to go through the competency framework training. We have approximately 250 managers. The programme started in August 2011 and we hope to complete it by September 2012, where all managers will have gone through the training.

The Rating Exercise

Focus 1: Does the organisation use the Competency Framework for Equality and Diversity Leadership?

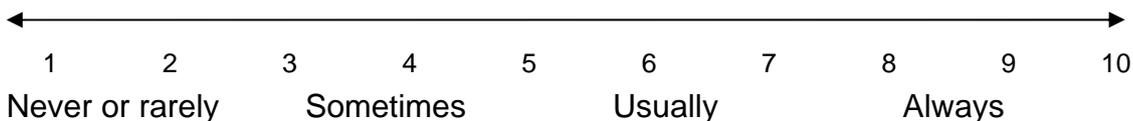
Undeveloped

Developing

Achieving

Excelling

7



CLOSING REMARKS

Ludlow summed up the day:

- A report will be produced and shared.
- Any actions from today will be taken away
- There will be future consideration given to participants who are hard of hearing

Ludlow concluded by thanking all those who contributed to the day and confirming that the final report will be both seriously considered and made widely available.

The panel felt that it was a worthwhile exercise and requested that they were included in future mailings from Slough CVS.

Appendix 1

List of Attendees

Jesal Dhokia	Slough CVS
Ludlow Johnson	NHS
Mike Hogg	Older Persons Advisory Forum (OPAF), and the Windsor and Maidenhead Community Forum (WAMCF)
Jayne Reilly	Shopmobility
Clare Jacklin	National Rheumatoid Arthritis Society
Bernard Curtiss	TVPS
Colin Ellis	Hearing Link
Saira Naseer	Patient Liaison Group

South Central Ambulance Service NHS Foundation Trust: EDS Objectives

EDS Goal 1- Better Health Outcomes for all

Appendix 6

REF	Action	Focus	Lead for Action	Protected Groups	Evidence	Timescales
1.1.4	Improve engagement with patients, carers & Communities	Ensure all protected groups are consulted on how health needs can be met and inequalities reduced	E&D lead/Steering & Working group	All Protected Groups	Evidence of full engagement.	Annual review
1.3.3	Improve engagement with patients from protected groups	Ensure all protected groups are consulted on how service changes are planned and transitions made smooth.	E&D lead/Steering & Working group	All Protected Groups	Evidence of full engagement	Annual review

South Central Ambulance Service NHS Foundation Trust: EDS Objectives

EDS Goal 2- Improving Patient access and experience

Appendix 6

REF	Action	Focus	Lead for Action	Protected Groups	Evidence	Timescales
2.1.3	Improve engagement with patients, carers and communities (Transgender)	All protected groups are consulted about access to services and how to make progress.	E&D lead Steering & Working group	All Protected groups	Evidence of full engagement	Annual review
2.3.2	Improve the monitoring of patient experience for protected groups	All protected groups are monitored for patient experience	E&D lead Steering & Working group	All Protected groups	Evidence of full data harvesting	Annual review
2.3.3	Improve engagement with patients & carers from protected groups	All protected groups engaged about their experiences of the organisation and how to make progress	E&D lead Steering & Working group	All Protected groups	Evidence of full engagement	Annual review
2.3.4	Improve engagement with key disadvantaged groups e.g. Transgendered.	Take account of key disadvantaged groups	E&D lead Steering & Working group	All Protected groups	Evidence of full engagement with key disadvantaged groups	Annual review

2.4.3	Improve monitoring of patient and carers reports of positive experiences	Take account of key disadvantaged groups	E&D lead Steering & Working group	All protected groups	Evidence of full data harvesting	Annual review
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EDS Goal 2- Improving Patient access and experience

Appendix 6

REF	Action	Focus	Lead for Action	Protected Group	Evidence	Timescales
2.4.4	Develop mainstream process for handling complaints from protected groups	Improve patient and carers experience for protected groups through mainstream processes.	E&D lead Steering & Working group	All Protected groups	Enhanced Patient experience review group	Annual review

EDS Goal 3- Empowered, Engaged and Included Staff

Appendix 6

REF	Action	Focus	Lead for Action	Protected Groups	Evidence	Timescales
3.1.2	Improve representation of protected groups across all levels of the	Demonstrate that staff from protected groups are represented on the	E&D lead Steering & Working group	All Protected groups	Quarterly workforce stats reflects increased	Annual review

	organisation	Board, in senior management teams and in clinical leadership roles, reflecting the workforce and the population being served			representation	
3.3.3	Joint Consultative Committee and staff to be consulted on protected characteristic groups around recruitment and selection	Engage with staff and staff side about recruitment and selection processes and how to make progress	E&D lead Steering & Working group	All Protected groups	Evidence of full data harvesting	Annual review
3.3.2	Include non operational in development to be competent and confident to plan, procure or deliver services that are personal, fair or diverse to meet the needs of all communities	Demonstrate that all staff are supported, trained and developed to be competent and confident to plan, procure or deliver services that are personal, fair or diverse to meet the needs of all communities	E&D lead Steering & Working group	All Protected groups	Staff from all protected groups across all disciplines competent to plan, procure and deliver services that meets the needs of all communities.	Annual review

EDS Goal 3- Empowered, Engaged and Included Staff

Appendix 6

REF	Action	Focus	Lead for Action	Protected Groups	Evidence	Timescales
3.3.3	Personal development opportunities and performance appraisals to be extended to non operational staff (Protected groups)	Engage with staff and staff side around the provision and uptake of personal development opportunities & performance appraisals for protected groups	E&D lead Steering & Working group	All Protected groups	Inclusion of non operational staff on Workforce Development board objectives	Annual review
3.3.4	Improve the development of disabled and BME staff Etc	Take account of key disadvantaged groups in the above processes?	E&D lead Steering & Working group	All Protected groups	Quarterly workforce stats reflects increased representation	Annual review

EDS Goal 3- Empowered, Engaged and Included Staff

Appendix 6

REF	Action	Focus	Lead for Action	Protected Groups	Evidence	Timescales
3.3.5	Improve development opportunities for staff from key disadvantaged groups.	Does SCAS deal with instances of possible unfairness in the provision and uptake of personal development opportunities & performance appraisals for protected groups and quality assure practice and outcomes, through mainstream processes?	E&D lead Steering & Working group	All Protected groups	Improved development opportunities for staff from key disadvantaged groups. Reflected in workforce reports.	Annual review
3.4.2	Improve the reporting and monitoring of bullying and harassment experienced by staff	How does the level of abuse, harassment, bullying and violence experienced by staff from protected groups compare with the level of abuse etc	E&D lead Steering & Working group	All Protected groups	Internal media event to encourage reporting and improved recording and monitoring	Annual review

		experienced by staff as a whole?				
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EDS Goal 4-Inclusive leadership at all levels

Appendix 6

REF	Action	Focus	Lead for Action	Protected Groups	Evidence	Timescales
4.4.2	Improve the recruitment, retention and progression of staff from protected groups	Board members and senior leaders actively take steps to create high performing diverse teams and develop diverse talent in the organisation	E&D lead Steering & Working group	All Protected groups	Increased representation of protected groups in the workforce at all levels	Annual review
4.4.3	Appraisals for staff at all levels to include equality objectives	Do Board members and senior leaders include advancing equality of opportunity and fostering good relations in their personal objectives and ask the same of their staff?	E&D lead Steering & Working group	All Protected groups	Reviewed Appraisal format	Annual review

<p>4.4.6</p>	<p>Improve engagement with protected groups thereby enhancing ability to obtain robust evidence for service review.</p>	<p>Do the Board and senior leaders demonstrate the importance of using robust evidence, across the protected groups, in its decision-making and service review and require the same of all parts of the organisation?</p>	<p>E&D lead Steering & Working group</p>	<p>All Protected groups</p>	<p>Evidence of full engagement with all protected groups.</p>	<p>Annual review</p>
<p>4.2.1</p>	<p>Improvement in the number of staff from protected groups in order to create a high performing diverse team</p>	<p>Do middle and line managers actively take steps to create high-performing diverse teams and develop diverse talent in the organisation?</p>	<p>E&D lead Steering & Working group</p>	<p>All Protected groups</p>	<p>Workforce report reflects an inclusive staff make up</p>	<p>Annual review</p>
<p>4.2.2</p>	<p>Appraisals for staff at all levels to include equality objectives</p>	<p>Do middle and line managers include advancing equality of opportunity and fostering good relation in their personal objectives and ask the same of their staff?</p>	<p>E&D lead Steering & Working group</p>	<p>All protected groups</p>	<p>Reviewed Appraisal format</p>	<p>Annual review</p>

Key

Colour	
Yellow	Excelling
Green	Achieving
Orange	Developing
Red	undeveloped

EDS Outcome 1.1 (EDS Goal 1 – Better health outcomes for all)

Appendix 7

“Services are commissioned, designed and procured to meet the health needs of local communities, promote well-being, and reduce health inequalities”

<p>Name: South Central Ambulance Service NHS Foundation Trust</p>	<p>Lead contact: Sharon Walters Director of HR Ludlow Johnson Equality Manager</p>
<p>SCAS responds to all 999 calls irrespective of protected characteristics. All 11 England ambulance trusts are measured for their clinical performance in five key areas - stroke, heart attack, cardiac arrest, asthma and diabetic emergency. SCAS is currently rated the number one English ambulance trust for stroke and heart attack, the number two for cardiac arrest and asthma and the number three for diabetic emergency. The average total score for all five Clinical Performance Indicators demonstrates that SCAS is currently setting the standard for all England ambulance services in terms of clinical performance.</p> <p>SCAS will continue to participate in local schools safety scheme such as the Berkshire “Safe Drive Stay Alive” programme. We have chosen to have a minimum membership age of 14 years to enable us to target teenagers through our newsletters on alcohol and drug awareness. Our participation in the Portsmouth night time economy partnership to reduce excessive drinking will continue.</p> <p>For patients with where English is not their first language SCAS provides a language line service and we have access to type and talk for patients with speech and hearing impairment via BT. SCAS also introduced a 41 language phrase book. SCAS provides training for staff to treat patients with learning disability and we are currently engaging with gypsy and traveller communities to train Community First Responders on fixed sites across the counties.</p>	
<p>EDS grade:</p>	<p>Achieving</p>

<p>Reasons for rating:</p>	<p>Outcome: For how many protected groups can the organisation demonstrate that the health needs of patients & carers are being met, and well-being is promoted?</p> <p>Engagement: The organisation engages with patients from some protected groups therefore rated developing.</p> <p>Mainstream processes: The panel felt it was unclear whether issues relevant to each group were fed through mainstream processes to the entire organisation, and agreed that a green (achieving) grade should be awarded.</p> <p>Progression plans: Milestones were not in place but would be developed based on the EDS grading, the panel agreed that a green (achieving) grade should be awarded.</p> <p>Disadvantaged groups: The evidence indicated that much progress had been made in addressing the needs of some disadvantaged groups but SCAS are still developing an appropriate structure for working with some invisible groups e.g. transgender. The panel agreed that a green (achieving) grade should be awarded.</p> <p>An overall grade of achieving was awarded with 6 achieving and one developing</p>
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EDS Outcome 1.2 (EDS Goal 1 – Better health outcomes for all)

“Individual patients’ health needs are assessed, and resulting services provided, in appropriate and effective ways”

<p>Name: South Central Ambulance Service NHS Foundation Trust</p>	<p>Lead contact: Sharon Walters Director of HR Ludlow Johnson Equality Manager</p>
<p>SCAS responds to all 999 calls irrespective of protected characteristics. All 11 England ambulance trusts are measured for their clinical performance in five key areas - stroke, heart attack, cardiac arrest, asthma and diabetic emergency. SCAS is currently rated the number one English ambulance trust for stroke and heart attack, the number two for cardiac arrest and asthma and the number three for diabetic emergency. The average total score for all five Clinical Performance Indicators demonstrates that SCAS is currently setting the standard for all England ambulance services in terms of clinical performance. SCAS reports no difference for protected characteristic groups.</p>	
<p>EDS grade:</p>	<p>ACHIEVING</p>
<p>Reasons for rating:</p>	<p>Outcome Through the use of best available evidence, for how many protected groups can the organisation demonstrate that patients from protected groups have their health-needs assessments, and resulting services, provided in appropriate and effective ways?</p> <p>Engagement: The issue of engagement as discussed in 1.4 was again considered and it was agreed that because there was incomplete engagement with patients from all protected groups, it was not possible to consider how assessments and services could be provided more appropriately and effectively. Accordingly, a green (achieving) grade should be awarded</p> <p>Mainstream processes: The panel felt it was unclear whether issues relevant to each group were fed through mainstream processes to the entire organisation, and agreed that a green (achieving) grade should be awarded.</p> <p>Progression plans: Milestones were not in place but would be developed based on the EDS grading, the panel agreed that a green (achieving) grade should be awarded.</p> <p>Disadvantaged groups: The evidence indicated that much progress had been made in addressing the needs of some disadvantaged groups but SCAS are still developing an appropriate structure for working with some invisible groups e.g. transgender. The panel agreed that a green (achieving) grade should be awarded.</p>

	<p>.An overall grade of achieving was awarded with 5 achieving and one excelling.</p>
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EDS Outcome 1.3 (EDS Goal 1 – Better health outcomes for all)
“Changes across services for individual patients are discussed with them, and transitions are made smoothly”

Name: South Central Ambulance Service NHS Foundation Trust		Lead contact: Sharon Walters Director of HR Ludlow Johnson Equality Manager
<p>The Commissioners have a responsibility to commission ambulance and healthcare services to meet the needs of the populations for which they are responsible. In order to fulfil such responsibilities the Commissioners wish to secure the provision by the Provider of ambulance and healthcare services for the benefit of Patients, and the Provider wishes to provide the Services to the Commissioners, on the terms of this Agreement. There are no identified gaps. See Clause 54 commissioners Contract</p>		
EDS grade:	ACHIEVING	
Reasons for rating:	<p>Outcome: How do service changes and transitions for patients from protected groups compare with the changes and transitions for patients as a whole?</p> <p>Engagement: The panel agreed that an amber (developing) grade should be awarded, in line with previous grading, some protected groups engaged.</p> <p>Mainstream processes: The panel felt it was unclear whether issues relevant to each group were fed through mainstream processes to the entire organisation, and agreed that a green (achieving) grade should be awarded.</p> <p>Progression plans: Milestones were not in place but would be developed based on the EDS grading, the panel agreed that a green (achieving) grade should be awarded</p> <p>Disadvantaged groups: The evidence indicated that the needs of individual patients were met where feasible and the panel agreed that a purple (excelling) grade should be awarded</p>	

	<p>An overall grade of achieving was awarded with 4 achieving, one developing and one excelling.</p>
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EDS Outcome 1.4 (EDS Goal 1 – Better health outcomes for all)

“The safety of patients is prioritised and assured. In particular, patients are free from abuse, harassment, bullying, violence from other patients and staff, with redress being open and fair to all”

Name: South Central Ambulance Service NHS Foundation Trust		Lead contact: Sharon Walters Director of HR Ludlow Johnson Equality Manager	
<p>SCAS provides a Patient Advice and Liaison Service (PALS) this is an accessible and confidential service for patients, relatives, carers or anyone acting on their behalf. We want to know when things go right or wrong so that SCAS can learn from the experiences of our patients and improve our services.</p> <p>SCAS has a range of policies and procedures aimed at safeguarding children and vulnerable adults.</p>			
EDS grade:	DEVELOPING		
Reasons for rating:	<p>Outcome: Can the organisation demonstrate that patients from protected groups have their safety prioritised and assured?</p> <p>Engagement: The panel agreed that a green (achieving) grade should be awarded</p> <p>Mainstream processes: The panel felt it was unclear whether issues relevant to each group were fed through mainstream processes to the entire organisation, and agreed that a green (achieving) grade should be awarded.</p> <p>Progression plans: Milestones were not in place but would be developed based on the EDS grading, the panel agreed that a green (achieving) grade should be awarded</p> <p>Disadvantaged groups: The evidence indicated that much progress had been made in addressing the needs of some disadvantaged groups but SCAS are still developing an appropriate structure for working with some invisible groups e.g. transgender. The panel agreed that a green (achieving) grade should be awarded.</p>		

	<p>An overall grade of achieving was awarded with 6 achieving.</p>
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EDS Outcome 1.5 (EDS Goal 1 – Better health outcomes for all)

Name: South Central Ambulance Service NHS Foundation Trust		Lead contact: Sharon Walters Director of HR Ludlow Johnson Equality Manager
<p>SCAS as an Ambulance service is not required to provide public health screening. SCAS continues to participate in local schools safety scheme such as the Berkshire “Safe Drive Stay Alive” programme. We have chosen to have a minimum membership age of 14 years to enable us to target teenagers through our newsletters on alcohol and drug awareness. Our participation in the Portsmouth night time economy partnership to reduce excessive drinking will continue</p>		
EDS grade:	Excelling	
Reasons for rating:	<p>SCAS does not provide public health screening, therefore it cannot be rated any lower than excelling because it cannot improve on a service it does not provide.</p> <p>The panel awarded 6 excelling due to above.</p>	

EDS Outcome 1.1 (EDS Goal 2 – Improved patient access and experience)

Patients, carers and communities can readily access services, and should not be denied access on unreasonable grounds

Name: South Central Ambulance Service NHS Foundation Trust		Lead Director: Sharon Walters Director of Workforce Equality Manager Ludlow Johnson
<p>SCAS responds to all 999 calls irrespective of protected characteristics. All 11 England ambulance trusts are measured for their clinical performance in five key areas - stroke, heart attack, cardiac arrest, asthma and diabetic emergency. SCAS is currently rated the number one English ambulance trust for stroke and heart attack, the number two for cardiac arrest and asthma and the number three for diabetic emergency. The average total score for all five Clinical Performance Indicators demonstrates that SCAS is currently setting the standard for all England ambulance services in terms of clinical performance.</p> <p>For patients where English is not their first language SCAS provides a language line service and we have access to type and talk for patients with speech and hearing impairment. We also provide a 41 language phrase book.</p> <p>Scas provides training for staff to treat patients with learning disability and we are currently engaging with gypsy and traveller communities to train Community First Responders on fixed sites across the counties.</p>		
EDS grade:	DEVELOPING	
Reasons for rating:	<p>Outcome: Can SCAS demonstrate that patients, carers and communities from protected groups can readily access services, and are not denied access on unreasonable grounds?</p> <p>Engagement: The organisation engages with patients, carers and communities from some protected groups, about accessing services.</p> <p>Mainstream processes: The organisation does use mainstream processes to make progress on this outcome. Achieving awarded</p> <p>Progression plans: Plans are in place to progress to the next grade, with milestones. Achieving awarded</p> <p>Disadvantaged groups: Some key disadvantaged groups are taken into account in the above processes. Achieving awarded</p> <p>An overall grade of achieving was awarded. Five achieving and one developing</p>	

EDS Outcome 2.2 (EDS Goal 2 – Improved patient access and experience)

Patients are informed and supported to be as involved as they wish to be in their diagnosis and decisions about their care and to exercise choice about treatments and places of treatment

Name: South Central Ambulance Service NHS Trust		Lead Director: Sharon Walters Director of Workforce Equality Manager Ludlow Johnson
<p>All SCAS clinicians receive patient consent training. All treatments are explained fully to the patient and consent gained prior to the administration of treatment. SCAS aims to ensure that patients receive the right treatment (appropriate) in the right place, at the right time and by the most appropriate practitioner. This means that the clinician may decide that conveyance to a hospital is not the best course of action for a patient, but this decision would be made in consultation with the patient.</p> <p>SCAS provides training for staff to treat patients with learning disability and we are currently engaging with gypsy and traveller communities to train Community First Responders on fixed sites across the counties.</p> <p>Where English is not the first language of the patient, then SCAS provides access to language line, Type and Talk via BT and all frontline ambulance vehicles carry a Multilanguage Phrase book with 41 languages plus some sign language.</p>		
EDS grade:	ACHIEVING	
Reasons for rating:	<p>Outcome: Can SCAS demonstrate that patients from protected groups are informed and supported to be involved in decisions about their care and to exercise choice about treatments and place of treatment?</p> <p>Engagement: The organisation engages with patients from most protected groups about the experience of patients and carers.</p> <p>Mainstream processes: The organisation aims to meet this EDS outcome using its patient experience review group, E&D Steering group and E&D working group.</p> <p>Progression plans: Plans are in place to progress to the next grade, with milestones. The organisation needs to develop systems to collect and analyse data from all protected groups to demonstrate that these groups are not disadvantaged when compared to the whole</p> <p>Disadvantaged groups: Most key disadvantaged groups are taken into account in the above processes.</p>	

	<p>The organisation is meeting the EDS outcome for most protected groups, and in its processes, takes into account some key disadvantaged groups. Progression plans are in place. For these reasons, the organisation was given an overall Achieving rating.</p>
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EDS Outcome 3.1 (EDS Goal 2 – Improved patient access and experience)

Patients and carers report positive experiences of their treatment and care outcomes and of being listened to and respected and of how their privacy and dignity is prioritised

Name: South Central Ambulance Service NHS Foundation Trust		Lead Director: Sharon Walters Director of Workforce Equality Manager Ludlow Johnson
<p>The Trust is very committed to becoming a learning organisation and one that continuously improves the quality and experience of care for the public it serves. To do this we need to identify learning and actions from feedback, patient stories, complaints and incidents when things did not go right, to ensure they do not happen again. We need to ensure that all staff across the Trust not only know about our success stories and when patients compliment us on our care, but also know and understand when things have not gone right and what we and they are doing to learn from the events.</p> <p>Complaints, feedback and incidents are all reviewed and monitored through the quality work stream areas of the Trust and outcomes recommendations and actions are tracked through management meetings, personal action plans and board committee meetings EG. Patient Experience Review Group and the Serious Untoward Incident Group.</p>		
EDS grade:	DEVELOPING	
Reasons for rating:	<p>Outcome: Can SCAS demonstrates that patients and carers report and enjoy positive experiences of the organisation, including being listened to and respected, and having their dignity and privacy prioritised?</p> <p>Engagement: The organisation engages with some patients and carers, from protected groups about their experiences of the organisation and how to make progress.</p> <p>Mainstream processes: The organisation demonstrates it aim to meet the outcome using its steering group, working group and the Patient Experience Review Group., for all protected groups,.</p> <p>Progression plans: Plans are in place to progress to the next grade, with milestones.</p> <p>Disadvantaged groups: Some key disadvantaged groups are taken into account in the above processes.</p> <p>The organisation is graded as ‘Developing’.</p>	

EDS Outcome 4.1 (EDS Goal 2 – Improved patient access and experience)

“Patients’ and carers’ complaints about services, and subsequent claims for redress, should be handled respectfully and efficiently”

Name: South Central Ambulance Service NHS Foundation Trust		Lead Director: Sharon Walters Director of Workforce Equality Manager Ludlow Johnson
As well as the PALS structure for concerns or compliments, SCAS has a robust Compliments, comments, concern and complains policy setting out how the Trust deals with Concerns and Complaints. The policy is accessible on the Trust website and can be provided in any language upon request. Leaflets are also available on PALS and the Complaints procedure. All complaints are dealt with by trained managers or the Complaint investigation unit, and are monitored by the PALS/Complaints manager, who reports to the Patient experience Review Group.		
EDS grade:	ACHIEVING	
Reasons for rating:	<p>Outcome: Can SCAS demonstrate that complaints by patients & carers from protected groups, and any subsequent redress, are handled respectfully and efficiently?</p> <p>Engagement: The organisation engages with most patients and carers from protected groups about how their complaints and subsequent redress are handled. Achieving</p> <p>Mainstream processes: The organisation has plans in place to demonstrate improvements in handling patient and carer complaints about services, using the steering E&D steering and working group and the Patient Experience Review Group. Developing</p> <p>Progression plans: Plans are in place to progress to the next grade, with milestones. PERG, Steering group and working group Achieving</p> <p>Disadvantaged groups: Some key disadvantaged groups are taken into account in the above processes. Developing</p> <p>An overall rating of achieving was awarded. Four Achieving and two Developing</p>	

EDS 1.1 (EDS Goal 3- Empowered, engaged and included staff)

Recruitment and selection processes are fair, inclusive and transparent so that the workforce becomes as diverse as it can be within all occupations and grades

Name: South Central Ambulance Service NHS Foundation Trust		Lead contact: Sharon Walters Director of HR Ludlow Johnson Equality Manager
<p>It is the policy of South Central Ambulance Service NHS Trust to fairly and cost-effectively recruit and select the best quality staff, in the right numbers and with the right skills, knowledge and experience to provide high quality service delivery, ensuring that our appointment procedures are consistent with good employment practice and legal requirements. The Trust is committed to ensuring that the recruitment and selection of staff is conducted in a manner that is systematic, efficient, and effective and promotes equality of opportunity. The recruiting manager with the assistance of an HR representative will conduct interviews and they are trained in interviewing and the wider selection process.</p> <p>SCAS is committed to compliance with the Equality Act 1010, and will recruit, retain and progress disable staff, we will provide reasonable adjustment, alternative roles and offers guaranteed interviews where a disable candidate meets the minimum criteria for the job. SCAS has two tick disability rating</p>		
EDS grade:	Achieving	
Reasons for rating:	<p>Outcome: Can SCAS demonstrate that staff from protected groups experience inclusive and equitable recruitment and selection within all occupations and grades?</p> <p>Engagement: The trust engages with some staff, also using staff surveys and engagement with its staff-side organisations. Developing</p> <p>Mainstream processes: The trust tackles this issue as part of mainstream processes. Qtrly workforce reports to the Board, E&D steering and working group.</p> <p>Progression plans: Plans are in place to progress to the next grade, with milestones.</p>	

	<p>Disadvantaged groups: Some key disadvantaged groups are taken into account in the above processes.</p> <p>The panel awarded an overall rating of Achieving, Four Achieving, one undeveloped and one Developing</p>
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EDS Outcome 3.2 (EDS Goal 3 – Empowered, engaged and Included staff)

“Through support, training, personal development and performance appraisal, staff are confident and competent to do their work, so that services are commissioned or provided appropriately”

Name: South Central Ambulance Service NHS Foundation Trust	Lead contact: Sharon Walters Director of HR Ludlow Johnson Equality Manager
SCAS complies fully with Agenda for Change principles for all terms and conditions, underpinned by a robust job evaluation system and appeal mechanism. SEE SCAS Master contract (Terms and Condition)	
EDS grade:	ACHIEVING

Reasons for rating:	<p>Outcome: Can SCAS demonstrate that staff from protected groups enjoys levels of pay and related terms & conditions no different to the pay and related terms & conditions for staff as a whole doing equal work or work rated as of equal value?</p> <p>Engagement: The trust engages with staff and with local staff-side organisations.</p> <p>Mainstream processes: The Trust has a range of processes, including the Joint Consultative Committee (staff Side) appeals mechanism, grievance procedure Steering and working groups.</p> <p>Progression plans: Plans are in place to progress to the next grade, with milestones.</p> <p>Disadvantaged groups: Key disadvantaged groups are taken into account in the above processes.</p> <p>An overall rating of Achieving was awarded. Two Excelling and three Achieving.</p>
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EDS Outcome 3.1 (EDS Goal 3 – Empowered, engaged and Included staff)

Through support, training, personal development and performance appraisal, staffs are confident and competent to do their work, so that services are commissioned or provided appropriately

Name: South Central Ambulance Service NHS Foundation Trust	Lead contact: Sharon Walters Director of HR Ludlow Johnson Equality Manager
The SCAS Appraisal Review Process identifies training and development needs and includes a personal development plan for performance and development objectives.	
EDS grade:	UNDEVELOPED

Reasons for rating:	<p>Outcome: Can SCAS demonstrate that staff from protected groups receives personal development and performance appraisals no different to that received by staff as a whole?</p> <p>Engagement: The trust engages with local staff-side organisations and its staff on some of this outcome.</p> <p>Mainstream processes: The trust processes are aimed at some staff and therefore not all protected groups.</p> <p>Progression plans: No Plans are in place to progress to the next grade, with milestones.</p> <p>Disadvantaged groups: Some key disadvantaged groups will be taken into account in the above processes.</p> <p>The Panel awarded a rating of UNDEVELOPED. Three undeveloped, one Developing and two Achieving.</p>
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Outcome 4.1 (EDS Goal 3 – Empowered, engaged and Included staff)

Staff are free from abuse, harassment, bullying, violence from both patients and their relatives and colleagues, with redress being open to all

Name: South Central Ambulance Service Ambulance NHS Foundation Trust	Lead contact: Sharon Walters Director of HR Ludlow Johnson Equality Manager
<p>SCAS has a Dignity at Work policy covering bullying and harassment by staff on colleagues and from patients and their relatives on staff. In both cases SCAS operates a zero tolerance approach. the Dignity at Work Policy is intended to:-</p> <ul style="list-style-type: none"> Confirm that the Trust will not tolerate bullying and harassment. Inform employees of the type of behaviour and attitudes that constitute bullying and harassment. Clarify the roles and responsibilities of staff and managers within the Trust in both preventing and dealing with cases of bullying and harassment. Provide employees who are experiencing bullying and harassment with a means of redress. <p>Incidents of reported bullying and harassment are recorded and monitored. No reports in the last year. SCAS subscribes to the Employee Assistance Programme; this programme offers support for our employees across a range of issues covering work issues and personal life.</p>	
EDS	ACHIEVING

grade:	
Reasons for rating:	<p>Outcome. Can SCAS demonstrate that staff from protected groups are free from abuse, harassment, bullying and violence from patients, their relatives and colleagues</p> <p>Engagement: The trust engages with staff and staff-side organisations, from all protected groups, about bullying and harassment..</p> <p>Mainstream processes: The Trust has processes to address bullying and harassment.</p> <p>Progression plans: Plans are in place to progress to the next grade, with milestones.</p> <p>Disadvantaged groups: Some key disadvantaged groups are taken into account in the above processes.</p> <p>The panel awarded an overall rating of ACHIEVING; Four Achieving, one Excelling and one Undeveloped.</p>

EDS Outcome 5.1 (EDS Goal 3 –Empowered, engaged and Included staff)

Flexible working options are made available to all staff consistent with the needs of patients, and the way people lead their lives

Name: South Central Ambulance Service NHS Foundation Trust	Lead contact: Sharon Walters Director of HR Ludlow Johnson Equality Manager
The SCAS Flexible Working Policy supports staff to achieve a healthy balance between their home life and work by providing a range of flexible working options. In addition SCAS has a Paid & Unpaid leave POLICY, supporting staff that requires leave for reasons other than sickness and annual leave. SCAS is also the holder of the “Two Tick” Disability symbol and has been assessed as an “ Employer Supporting Working Carers”	
EDS grade:	ACHIEVING

Reasons for rating:	<p>Outcome: Can the organisation demonstrate that staff from protected groups have access to a full range of flexible working options?</p> <p>Engagement: The trust does engage with staff and staff-side organisations about developing and improving flexible working options.</p> <p>Mainstream processes: The organisation does not aim to demonstrate in any mainstream process, how the workforce is supported to remain healthy, with a focus on addressing major health and lifestyle issues.</p> <p>Progression plans: Plans are in place to progress to the next grade.</p> <p>Disadvantaged groups: Key disadvantaged groups are taken into account in the above.</p> <p>The panel awarded an overall rating of Achieving: Four achieving and two excelling.</p>
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EDS Outcome 6.1 (EDS Goal 3 –Empowered, Engaged and Included Staff)

The workforce is supported to remain healthy, with a focus on addressing major health and lifestyle issues that affect individual staff and the wider population”

Name: Southern Health NHS FT	Lead contact: Sandra Grant Director of Workforce and Development/ CEO
<p>Health and Safety Policy supports the Trust’s core objective to provide a safe working environment. Sickness Absence Policy supports the Trust to manage and support absence in conjunction with Occupation Health.</p> <p>Stress Policy; It is acknowledged that excessive stress often arises outside of the work environment but that this may be linked to wellbeing at work. These policies apply to all staff irrespective of their protected characteristics</p>	
EDS grade:	DEVELOPING

Reasons for rating:	<p>Outcome: Can SCAS demonstrate that staffs from protected groups are supported to remain healthy and have access to initiatives that promote healthy lifestyles?</p> <p>Engagement: The trust engages with staff, staff-side organisations.</p> <p>Mainstream processes: The trust has processes in place, covering all protected groups, to ensure that the Board and senior leaders conduct and plan their business so that equality is advanced, and good relations fostered, within their organisations.</p> <p>Progression plans: Plans are in place to progress to the next grade</p> <p>Disadvantaged groups: Key disadvantaged groups are taken into account in the above</p> <p>The panel awarded a rating of Achieving' Six achieving.</p>
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EDS Outcome 4.1 (EDS Goal 4 – Inclusive leadership at all levels)
“Boards and senior leaders conduct and plan their business so that equality is advanced, and good relations fostered, within their organisations”

Name: South Central Ambulance Service NHS Foundation Trust	Lead contact: Sharon Walters Director of HR Ludlow Johnson Equality Manager
<p>SCAS has appointed an Equality and Human Rights Manager to lead the strategic development, implementation and mainstreaming of the Equality, Diversity and Human Rights agenda, ensuring the Trust meets statutory obligations and key policy driver requirements. To this end a revised Single Equality Scheme has been drafted, outlining to staff and the public how South Central Ambulance Service NHS Trust intends to demonstrate its commitment to being an organisation that embraces equality and human rights, and its stand against discrimination of any kind.</p> <p>South Central Ambulance Service NHS Trust’s Equality and Diversity Steering Group is chaired by the Trust’s Chief Executive Officer. The group has a wide ranging membership from within the Trust and representatives from the voluntary sector.</p> <p>SCAS also has a working group chaired by the Equality & Diversity Manager, this group is tasked with implementing tasks set by the steering group, it reports to the CEO and the Board.</p>	

Achieving
<p>Outcome: Do Board members and senior leaders communicate their vision for services and workplaces that are personal, fair and diverse within the organisation and beyond to the wider health and care system?</p> <p>Engagement: The panel felt that SCAS engaged on a wider community level and should target specific groups at a wider level. Rated Achieving.</p> <p>Data and evidence: The panel felt that there was insufficient evidence of robust use of data across protected groups in decision making and service review. Rating developing.</p> <p>Mainstream processes: SCAS has mainstream processes to ensure most protected groups are considered in dealing with personalisation. Fairness and diversity. Rated achieving</p> <p>An overall rating of ACHIEVING was awarded with 4 achieving and 3 developing</p>

EDS Outcome 4.2 (EDS Goal 4 – Inclusive leadership at all levels)

“Middle managers and other line managers work support and motivate their staff to work in culturally competent ways within a work environment free from discrimination”

Name: South Central Ambulance Service NHS Foundation Trust	Lead contact: Sharon Walters Director of HR Ludlow Johnson Equality Manager
It is the policy of South Central Ambulance Service NHS Trust to fairly and cost-effectively recruit and select the best quality staff, in the right numbers and with the right skills, knowledge and experience to provide high quality service delivery, ensuring that our appointment procedures are consistent with good employment practice and legal requirements. The Trust is committed to ensuring that the recruitment and selection of staff is conducted in a manner that is systematic, efficient, and effective and promotes equality of opportunity. (See Recruitment Policy 26/7/2011)	
EDS	DEVELOPING

<p>grade:</p>	
<p>Reasons for rating:</p>	<p>Outcome: Do middle managers actively take steps to create high performing diverse teams and develop diverse talent in the organisation?</p> <p>Engagement: The trust engages with staff of most protected groups and with staff-side organisations but needs further development. Rated achieving.</p> <p>High performing diverse team: The panel scrutinised the diversity in earlier questions, where it was discussed that there needs to be further representation and better representation, for this reason they rated SCAS as 'developing'</p> <p>Progression Plans: Plans are in place to progress to the next grade, with milestones.</p> <p>Disseminate examples of good practice: There was enough evidence presented to the panel for them to rate this. It was noted that in the Year Ending March 2011, 121 complaints were received however none of them were around Equality and Diversity. SCAS monitor all feedback and the feedback is given to staff members as well as compliments, of which 660 were received the same year. Rating achieving.</p> <p>Competency Framework for Equality and Diversity Leadership. Training for competency for equality and diversity has been undertaken, to be delivered to all managers and staff. All managers and supervisors have to go through the competency framework training. We have approximately 250 managers. The programme started in August 2011 and we hope to complete it by September 2012, where all managers will have gone through the training.</p> <p>An overall rating of achieving was awarded. Two developing and 5 achieving</p>

Key

Colour	
	Excelling
	Achieving
	Developing
	undeveloped

South Central Ambulance Service NHS Trust: Equality Impact Assessments

What is an Equality Impact Assessment?

The purpose of an Equality Impact Assessment (EQIA) is to improve the work of South Central Ambulance Service NHS Foundation Trust (SCAS) by making sure it does not discriminate and that, where possible, it promotes equality.

It is a way to make sure individuals and teams think carefully about the likely impact of their work on patients and stakeholders and take action to improve strategies, policies and functions, where appropriate.

The EQIA focuses on assessing and recording the likely equalities impact of a strategy, policy or functions. It involves anticipating the consequences of policies and functions on groups and making sure that, as far as possible, any negative consequences are eliminated or minimised and opportunities for promoting equality are maximised.

1. Strategy refers to both those plans that are ratified at Service and Executive Board level, that touch on direct or indirect service delivery, including support service functions.
2. A policy is defined as a written document outlining an approved decision, principle, plan and/or set of procedures that influences and determines the way the Trust carries out its business externally and/or internally.
3. A function is a service, department or Directorate within the Trust and its methods of working, including

The Trust recognises that due to the nature of the Health Service it is, at times, subject to external decision making and policy development, e.g. DOH circulars and directives – however, it will ensure that the implications of equality are considered in line with the policy review arrangements.

The EQIA is carried out by completing a form. The first section of the form is used for a preliminary screening and the second section is used for a more detailed assessment.

The Trust's strategies undergo a more wide-ranging assessment. Not only are EQIAs done for the planning stage, the draft stage and the final stage of ratification of the strategies by the Board, but teams within SCAS comment on and review the strategies and their equalities impacts on an ongoing basis.

What does the Trust mean by an 'impact'?

The Trust looks at two possible impacts in its assessments:

A negative or adverse impact; where the impact could disadvantage one equality target group, or some equality target groups. This disadvantage may be differential, where the negative impact on one particular group of individuals or one equality target group is likely to be greater than on another.

It should be noted that some negative impacts may be intended. The EQIA provides an opportunity to assess this.

An event that was held in a building with no induction loop facilities would have a negative or adverse impact on some attendees with a hearing impairment.

An impact that will have a favourable or positive impact on an equality target group, or some equality target groups, or improve equal opportunities and/or relationships between groups. This positive impact may be differential, where the impact on one particular group of individuals or one equality target group is likely to be greater than on another.

A targeted training programme for black and minority ethnic women would have a positive differential impact on black and minority ethnic women, compared with its impact on white women and all men. However, it would not necessarily have an adverse impact on white women or men.

When to carry out an EQIA.

The following projects and policies require an EQIA:

- All Trust Strategies and all best value reviews
- Policies and/or functions that each of the Trusts directorates identify as requiring an EQIA, as part of the business planning process each year. These should be policies and projects that:
 - are of relevance to the Trusts duty to promote equality
 - and are primary high level functions, rather than support functions or sub-projects (see intranet link for guidance)
 - and are in their initial planning stage or undergoing a revision.

It is part of the Trust's project management and business planning methodology that all projects and capital purchases must go through an EQIA.

All project leaders are responsible for incorporating equalities into their projects or strategies and for assessing the equalities impacts. This should be a continuous process, starting at the very beginning of the project. Any project or policy team can use the EQIA to help them assess the potential impact of their project, regardless of whether it has been identified by the directorate as requiring an EQIA.

If there is any doubt as to whether a project or policy requires initial screening, project leads should contact their manager or the Trust's Equality Lead. A list of strategies, policies and projects requiring an EQIA in the current financial year is maintained on the intranet.

The EQIA is done in two parts. In section one the project goes through a screening process. In section two it undergoes a more thorough assessment. This second section is further divided into two parts.

Equality Impact Assessment Section one: Screening

Section one of the EQIA, the screening, should be carried out at the planning and development stage of the project, strategy or policy. This section should be completed before authorisation is obtained for the project to be initiated.

Some large projects will be made up of many different activities, some of which are in themselves projects. As part of the screening, these activities should be listed and if any of them are projects in themselves, the project lead should consider whether they need to undergo a separate EQIA screening.

Once section one has been completed, the project is only required to go through the second stage of the EQIA if:

- Any equality target group or sub section of an equality target group would be negatively affected
- And that impact is assessed as of high significance (see flow chart on page 19).

However, it may be useful for the project to go through the second stage even if only positive impact has been identified, or the impact is of low significance. This would enable a thorough assessment to take place.

The completed screening form should be kept on file. It maybe required for audit purposes.

Detailed guidance on completing the initial screening (EQIA section one), including assessing the level of significance of an impact, is set out below.

Equality Impact Assessment Section two: Detailed assessment

Section two of the EQIA is used to examine projects which the initial screening indicated may have an negative impact on certain equality target groups. Functions, projects, strategies and policies go through this second stage if there is a danger that the negative impact they have on these groups falls into one (or more) of the following categories:

1. It is assessed as of high impact.
2. It is not intentional.
3. It is illegal or possibly illegal (ie discriminatory according to anti-discrimination legislation).

Such projects must have a detailed assessment carried out, using section two of the EQIA.

Section two is in two parts:

Part A) Provides an opportunity to assess, in some detail, the evidence for a possible negative impact. It ensures policy, strategy and project teams have researched and consulted with the equality target groups that may be affected.

Part B) Completes the assessment and leads to an action plan that will aim to minimise any negative impacts and maximise positive impacts.

Copies of all full EQIAs should be retained on file, with a copy sent to the Trust's Equality Lead. Please note that completed EQIA forms can be subject of a Freedom of Information request. The method by which a member of the public can request to see them and information about EQIAs is available on the GLA's website.

Detailed guidance on completing section two of the EQIA form is set out below.

Detailed Guidance for EQIA Section Two **Tips and general guidance**

- ❖ Equality Impact Assessments are designed to be a challenging process, but they are not intended to be over complicated or about 'getting it right'. It is not an exact science and project leads should take a common sense approach.
- ❖ Project leads need to be prepared for changes to the project, strategy or policy that the EQIA identifies as necessary. It should not be a last minute check.
- ❖ The aim should be to try to take the perspective of some one outside of the Trust, such as a potential beneficiary or user, when carrying out an EQIA.
- ❖ The form does not need to be completed by one person in isolation. Neither does the EQIA form require completion all in one go. In fact part (b) of section two may need to be completed some months after the rest of the EQIA.
- ❖ Completing the form is similar to doing a risk assessment. It involves predicting and assessing what the implications of a function, policy, strategy or project will be on a wide range of people with different and varied needs. This can be a difficult thing to do and it is not intended that project leads complete the form without the support and advice of others in the project team, the Trust's Equalities Lead, the PPI Forum or managers. Completing the form with a colleague, who can provide a different perspective, will help.
- ❖ Do not spend too long on the initial screening. At the screening stage, the Trust is trying to assess obvious negative or positive impact or, importantly, gaps in our knowledge about likely impact.
- ❖ The screening should make full use of the following:
 - project lead's and the project team's professional knowledge of the issue and/or personal experience.
 - previous consultation results
 - analysis of previous complaints, comments, evaluations and monitoring
 - research and reports
 - library searches
 - internet searches
 - advice from internal and external specialists

- staff with previous involvement of direct implementation of a similar project/policy.
- ❖ It is particularly important that project leads realise they have a legal duty to assess the impact of the strategy, policy or project on black and minority ethnic communities and to consider the promotion of race, disability and age equality.
- ❖ Question 4 of section one of the EQIA form can be difficult to answer in areas where there is little, or no information. In these cases, it is recommended to note the lack of data and move on to the next part of the form. The lack of data should not be a reason to halt the process or not complete the form.
- ❖ If the likely impact on the different equality target groups is not known, then the project lead or project team needs to take action to acquire that information.
- ❖ The best way to find out if a policy or project is likely to impact negatively or positively on equality target groups is to find out if research or data already exists or to directly consult representatives of those groups or relevant specialist organisations. Details of such organisations can be sought from the Trust's Equalities Lead.
- ❖ Following the completion of an EQIA, the project lead should outline any changes required to the policy or project and other actions required. The need for the Trust to collect or obtain data on certain issues could be one such action (such as commissioning research or carrying out monitoring).

Partnership projects

The Trust aims to be an exemplary organisation in relation to equalities and to champion equal opportunities across Buckinghamshire, Oxfordshire, Berkshire and Hampshire. The statutory requirements to assess the impact of policies and functions on all protected Characteristics equally apply to partnerships and contractual relationships.

The EQIA procedures apply to all projects and policies where the Trust is the lead agency in a multi-agency project or a Trust group project. The Trust is the lead agency if the project or policy was initiated by the Trust and the monitoring, evaluation and strategic overview of the implementation lies with the Trust, even if the Trust is not the operational lead.

On joint projects and initiatives where the Trust is not the lead organisation, the Trust employee should raise the issue of the need to carry out an equalities assessment in order to comply with the requirements of the Acts. The Trust should carry out an EQIA screening before deciding to participate in the project.

Equality Impact Assessment Form Section One – Screening

Name of Function, Policy or Strategy:.....

.....

Officer completing assessment:.....

Telephone.....

1. What is the main purpose of the strategy, function or policy?
2. List the main activities of the function or policy? (for strategies list the main policy areas)
3. Who will be the main beneficiaries of the strategy/function/policy?
4. Use the table overleaf to indicate the following:- a. Where do you think that the strategy/function/policy could have an adverse impact on any equality group, i.e. it could disadvantage them? b. Where do you think that there could be a positive impact on any of the groups or contribute to promoting equality, equal opportunities or improving relations within equality target groups?

		Positive Impact – it could benefit	Negative Impact – it could disadvantage	Reasons
GENDER	Women			
	Men			
RACE	Asian or Asian British People			
	Black or Black British People			
	Chinese people and other people			
	People of Mixed Race			
	White people (including Irish people)			
	Disabled People			
Lesbians, gay men and bisexuals				
Transgender people				
AGE	Older People (60+)			
	Younger People (17 to 25) and children			
	Religion/belief Groups			
	Equal Opportunities and/or improved relations			

Notes:

Religion or belief groups cover a wide range of groupings, the most common of which are Muslims, Buddhists, Jews, Christians, Sikhs and Hindus. Consider religion or belief categories individually and collectively when considering positive and negative impacts.

The categories used in the race section refer to those used in the 2001 Census. Consideration should be given to the specific communities within the broad categories such as Bangladeshi people and to the needs of other communities that do not appear as separate categories in the Census, for example, Polish.

5. If you have indicated that there is a negative impact, is that impact:		
	Yes	No
Legal (it is not discriminatory under anti-discriminatory law)	<input type="checkbox"/>	<input type="checkbox"/>
Intended	<input type="checkbox"/>	<input type="checkbox"/>
Level of Impact	High	Low
If the negative impact is possibly discriminatory and not intended and/or of high impact then please complete a thorough assessment after completing the rest of this form.		
6(a). Could you minimise or remove any negative impact that is of low significance? Explain how below:		
6(b). Could you improve the strategy, function or policy positive impact? Explain how below:		
7. If there is no evidence that the strategy, function or policy promotes equality, equal opportunities or improves relations – could it be adopted so it does? How		

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Please sign and date this form, keep one copy and send one copy to the Trust's Equality Lead.

Signed:.....

Name:.....

Date:.....

Equality Impact Assessment Form Section Two – Full Assessment

Name of Function, Policy or Strategy:.....

.....

Officer completing assessment:.....

Telephone.....

Part A

1. Looking back at section one of the EQIA, in what areas are there concerns that the strategy, policy or project could have a negative impact?

Gender

Race

Disability

Sexual Orientation/Transgender

Age

Religion or Belief

2. Summarise the likely negative impacts:-

.....

.....

.....

.....

.....

.....

4. Using the table below, give a summary of what previous or planned consultation on this topic, policy, function or strategy has or will take place with groups or individuals from the equality target groups and what has this consultation noted about the likely negative impact?

Equality Target Groups	Summary of consultation planned or taken place
Gender	

Race	
Disability	
Sexual Orientation	
Older People	
Younger People	
Religion or Belief	
Transgender	

4. What consultation has taken place or is planned with Trust staff including staff that have or will have direct experience of implementing the strategy, policy or function?

.....

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.....

.....

5. Check that any research, reports, studies concerning the equality target groups and the likely impact have been used to plan the project and guide or indicate what research you intend to carry out:-

Equality Target Groups	Title/type of/details of reserach/report
Gender	
Race	
Disability	
Sexual Orientation	
Older People	
Younger People	
Religion or Belief	
Transgender	

6. If there are gaps in your previous or planned consultation and research, are there any experts/relevant groups that can be contacted to get further views or evidence on the issues?

Yes (Please list them and explain how you will obtain their views)

.....

.....

.....

No

Part B

Complete this section when consultation and research has been carried out

7a. As a result of this assessment and available evidence collected, including consultation, state whether there will be any changes made/planned to the policy, strategy or function.

7b. As a result of this assessment and available evidence is it important that the Trust commission specific research on this issue or carry out monitoring/data collection? (You may want to add this information directly on to the action plan at the end of this assessment form)

.....

.....

.....

.....

8. Will the changes planned ensure that negative impact is:

Legal?
(not discriminatory, under anti-discriminatory legislation)

Intended?

Low impact?

9a. Have you set up a monitoring/evaluation/review process to check the successful implementation of the strategy, function or policy?

Yes No

9b. How will this monitoring/evaluation further assess the impact on the equality target groups/ensure that the strategy/policy/function is non-discriminatory?

Details:

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.....
.....
Please complete the action plan overleaf, sign the EQIA, retain a copy and send a copy of the full EQIA and Action Plan to the Trust's Equality Lead.

Signed:..... Name:.....

Date:.....

